

CITY OF WINNIPEG

HEALTH DEPARTMENT



THE ROYAL SOCIETY
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# ANNUAL REPORT

of the Medical Health Officer

Year 1958

R.G. Cadham, M.D., D.P.H.



#### CITY HEALTH DEPARTMENT

Winnipeg, 1959

Chairman and Members, Committee on Public Health and Welfare.

Madam and Gentlemen:

I have the honour to present the annual report and the financial statement of the Health Department for the year 1958.

Some of the highlights of the year were - an increase in the establishment of an Assistant Medical Health Officer to which Dr. J. E. Davies was appointed on July 1st. A Federal Health training grant was obtained for Dr. J. B. Morison, Deputy Medical Health Officer to attend the University of Toronto for a post-graduate course leading to a diploma in public health. A major change in policy was the transfer of the responsibility for supplying drugs and prosthetic appliances to indigent patients from the Department of Public Welfare to the Health Department.

There was a marked drop in the infant mortality rate compared to 1957 mainly as a result of fewer deaths occurring from postnatal asphyxia and atelectasis. The attendance at the expectant mothers, classes showed considerable increase. Two classes were established for the visually handicapped school children. The central registry for handicapped children was extended to include information concerning school children with diabetes and epilepsy.

An outbreak of Poliomyelitis occurred during the summer.

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Over 400 cases of scarlet fever were reported which is more than has occurred for many years. Fortunately, the disease was very mild and no deaths were reported. Infectious hepatitis continues to become more prevalent. Again, we were fortunate to have a very low death rate from tuberculosis. Our policy of immunizing all school children against policyelitis, diphtheria, tetanus and smallpox was continued.

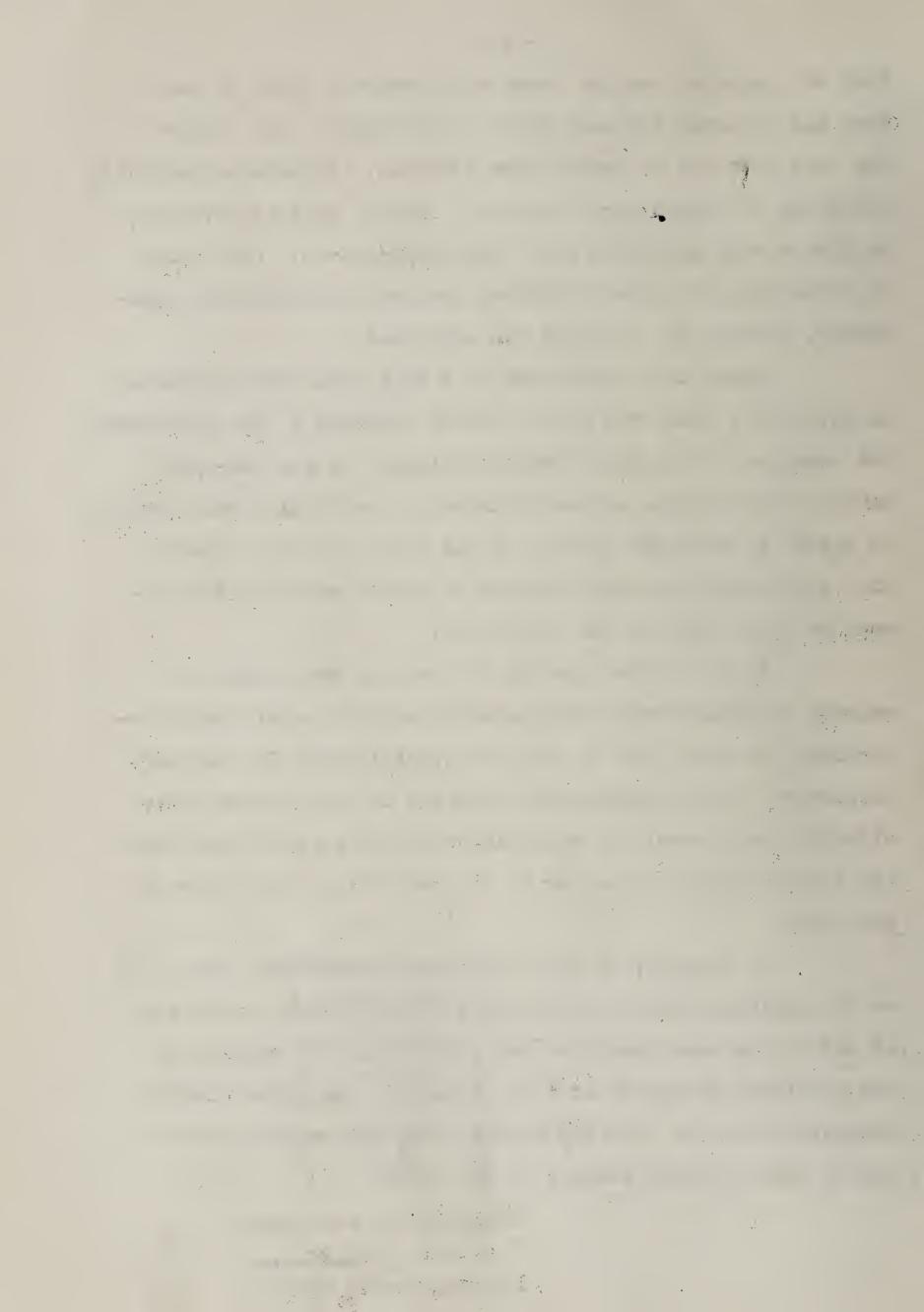
Since the appointment of a full time dental director in late 1957, there has been a marked increase in the efficiency and services of the Child Dental Division. A new two-chair School Dental Clinic was established in the William Whyte School to serve a northern section of the city. We are grateful that our budget has been expanded to assist with the development of this phase of our activities.

In the latter part of the year as the result of a general training school program with the Provincial Health Department, we were able to fill our establishment for sanitary inspectors. Great improvement occurred in the rooming house situation as a result of enforcing regulations governing rooming houses which were passed by the Provincial Legislature in late 1957.

In summary, we have had a very progressive year, and on the following pages are recorded in detail the activities of the Health Department for the year 1958. The support of the Committee on Health as well as that of the other elected representatives to the City Council has been appreciated by myself and all other members of the staff.

Respectfully submit ted,

Medical Health Officer.



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#### COMMITTEE ON PUBLIC HEALTH AND WELFARE

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Alderman D. A. Mulligan
Alderman E. I. Tennant
Alderman A. E. Bennett
Alderman H. B. Scott
Alderman J. Penner
His Worship Mayor Juba (ex officio)

#### STAFF

Medical Health Officer R. G. Cadham, M.D., D.P.H
Deputy Medical Health Officer J. B. Morison, M.D.
Assistant Medical Health Officer J. E. Davies, M.B.B.S.
Consultant, Child Care Services H. Medovy, M.D.
Medical Supervisor in Nursing Homes G. McInnis, M.D.
Medical Supervisor in Nursing Homes A. Campbell, M.D.
Director - Child Dental Services C.H. McCormick, D.D.S., D.D.P.H.
Director, Public Health Nursing Miss L. MacKenzie, R.N., M.A., P.D.
Chief Health Inspector E. J. Rigby, D.V.M.
Secretary E. Singleton

#### History

From a Hudson's Bay Company trading post (Fort Garry) in 1870, with a population of 215, Winnipeg has grown to the size and finish of a first-class city of approximately 256,000 people. When the City was incorporated in 1873 there was a population of 1,869.

The present Health Department may be said to date from 1900 when the late Dr. A. J. Douglas was appointed the first full time Health Officer.

From 1881 to 1900 Winnipeg had a series of part time Medical Health Officers.

In 1941 amalgamation with the School Medical Services occurred and the services increased and extended to all child caring institutions in the City without distinction. This applies to Medical, Dental and Nursing Services.

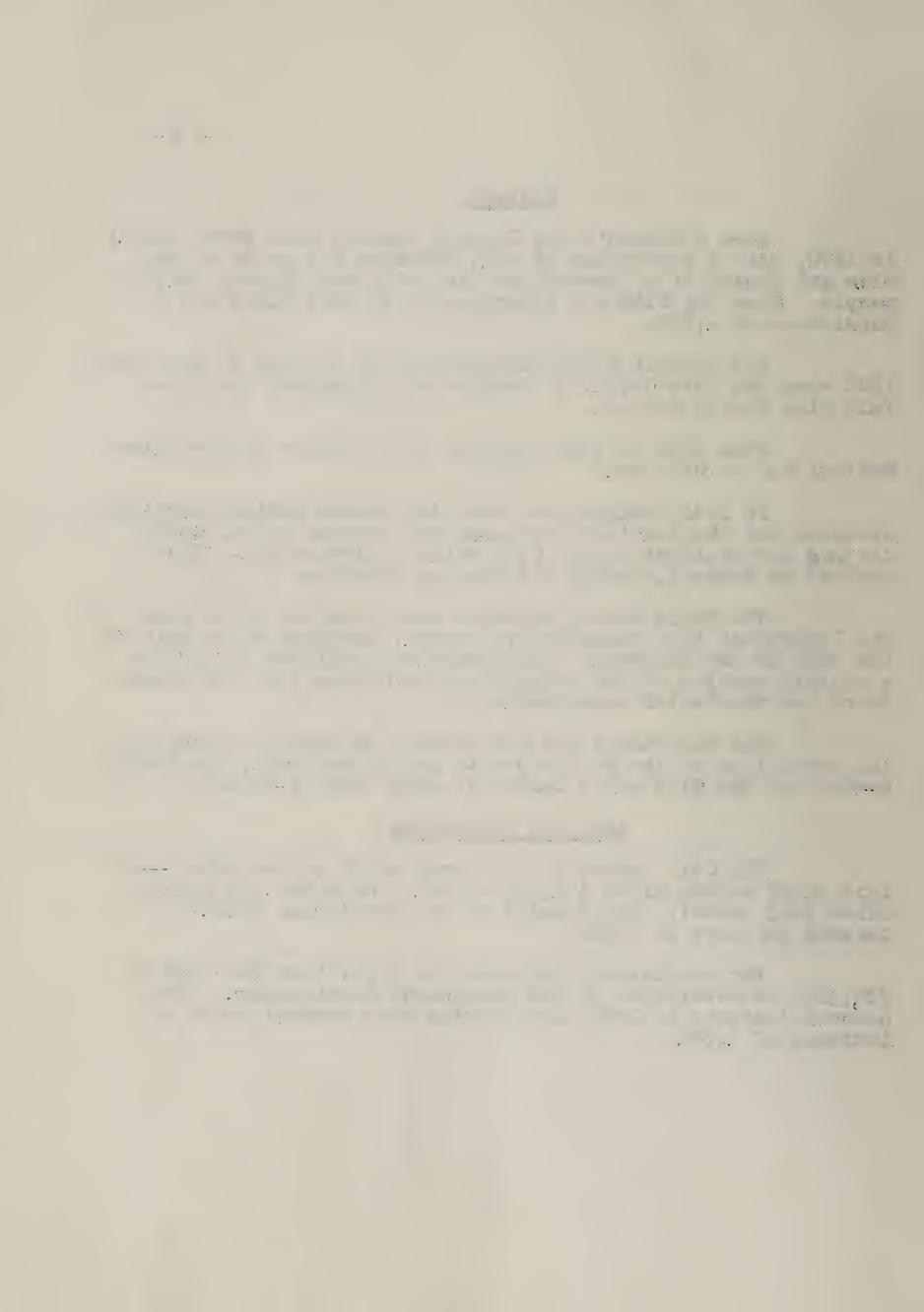
The Child Health Services Board was set up to help the Department in a consultative manner, meetings being held at the call of the Chairman. This Board was replaced in 1955 by a monthly meeting of the administrative Officers of the School Board and the Health Department.

The Department has now several Branches to carry out the provisions of the Public Health Act of Manitoba, the Health By-law of the City and a number of other City By-laws.

#### Area and Population

The City covers a total area of 25 square miles ---- land 24.27 square miles (15,535 acres), and water .73 square miles (465 acres). The density of the population is 16.0 persons per acre of land.

For statistical purposes the population for 1958 is 255,510, as determined by the Assessment Commissioner. The natural increase in 1958 (live births less deaths) shows an increase of 3,326.

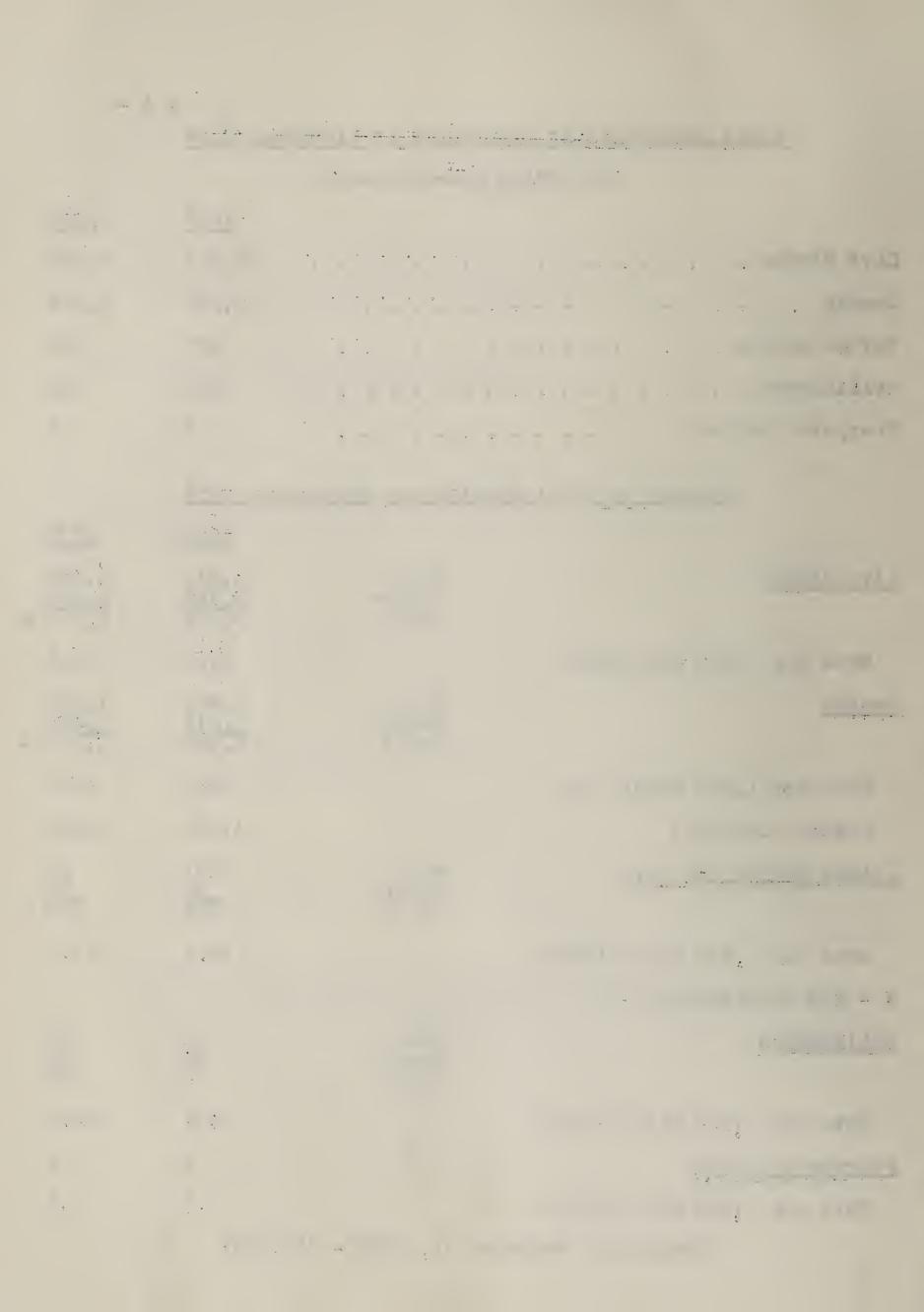


## Vital Statistics As Registered in Winnipeg, 1958

(Including Non-Residents)

•	•		
		1958	1957
Live Births	• • • • • •	. 8,597	8,829
Deaths		. 2,858	2,871
Infant Deaths		• 223	246
Stillbirths		. 122	134
Puerperal Deaths		• 4	2
Summary of Vital Stat	tistics, Reside	ents, 1958	
		1958	1957
Live Births	Male Female Total	3,034 2,858 5,892	3,099 2,967 6,067 +
Rate per 1,000 Population		23.1	23.8
Deaths	Male Female Total	1,490 1,076 2,566	1,502 1,048 2,551 /
Rate per 1,000 Population		10.0	10.0
Natural Increase		3,326	3,516
Infant Deaths (-1 yr.)	Male Female Total	101 _54 155	94 85 180 /
Rate per 1,000 Live Births		26.3	29.7
/ - Sex Undetermined - 1			
Stillbirths	Male Female Total	42 44 86	45 41 86
Rate per 1,000 Live Births		14.6.	14.8
Puerperal Deaths		4	2
Rate per 1,000 Live Births		•7	•3

(Population December 31, 1958, - 255, 510)



#### Live Births, Residents Only

Live births occurring to Winnipeg residents during 1958 numbered 5,892 giving a rate of 23.0 per 1000 population which is a decrease of 3.3% from the rate of 23.8 recorded in 1957. There were 3,034 boys and 2,858 girls born giving a ratio of 1,062 boys to 1000 girls. First children accounted for 2,072 or 35.2% of the total births, second children 1,688 or 28.4%, third children 1,038 or 17.6%, 5,601 or 95.2% included the fifth child. 5,753 or 97.8 were born to mothers between the ages of 15 and 39.

#### Infant Mortality

There were 155 deaths of infants under one year of age in 1958 giving a rate of 26.3 per 1000 live births. This is a decrease of 11.4% from the high rate of 29.7 recorded in 1957. The chief causes of infant deaths were (1957 figures are shown in brackets) Immaturity 33 (38), Postnatal asphyxia and atelectasis 12 (29), Injury at Birth 20 (17), Pneumonia, all forms 19(20). A detailed list of the causes of infant deaths is on pages 14 and 15 of this report.

#### Neo-Natal Mortality

Deaths of infants in the first four weeks of life numbered 123 which comprised 79.3% of the total infant deaths under one year of age as compared with 76.1% in 1957 and 71.5% in 1956. The neo-natal mortality rate per 1000 live births was 20.9 which is a decrease of 9.2% from the rate of 22.6 recorded in 1957.

#### Maternal Mortality

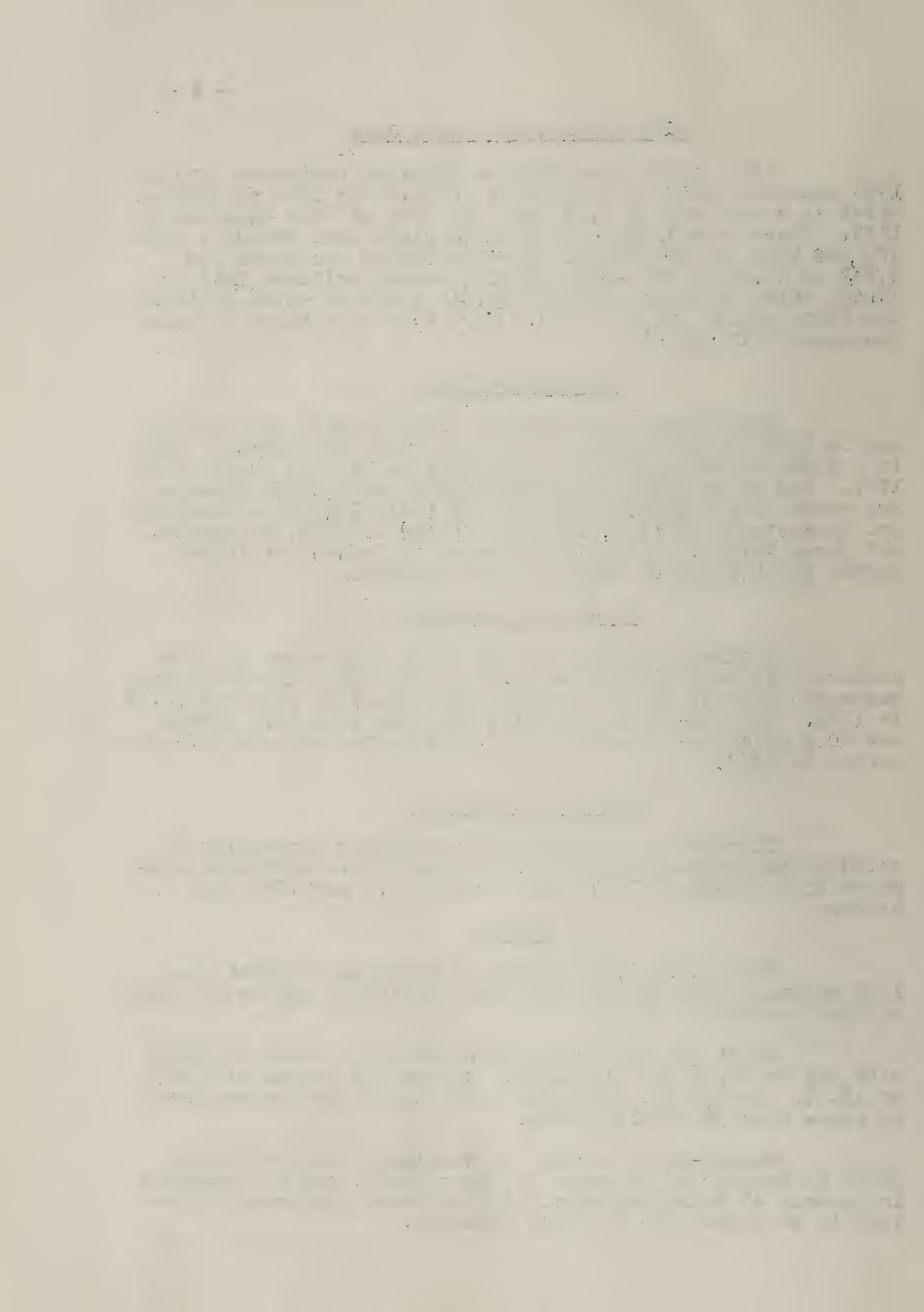
There were 4 deaths from conditions pertaining to childbearing giving a rate of .7 per 1000 live births as compared to 2 deaths in 1957 with a rate of .3 per 1000 live births.

#### Deaths

There were 2,566 deaths of Winnipeg residents in 1958 giving a rate of 10.0 per 1000 population and is the same as that recorded in 1957.

Heart diseases were again the major cause of death with 958 or 37.3% of all deaths. Cancer was second with 475 or 18.5%. Accidents, poisonings and violent deaths continue to cause over 5% of all deaths.

Eighty-seven percent of Winnipeg resident deaths occur in persons of 45 years of age or more, and 64% occurred in persons 65 years and over. In the broad age group of one year to 44 years, 7% of deaths occurred.



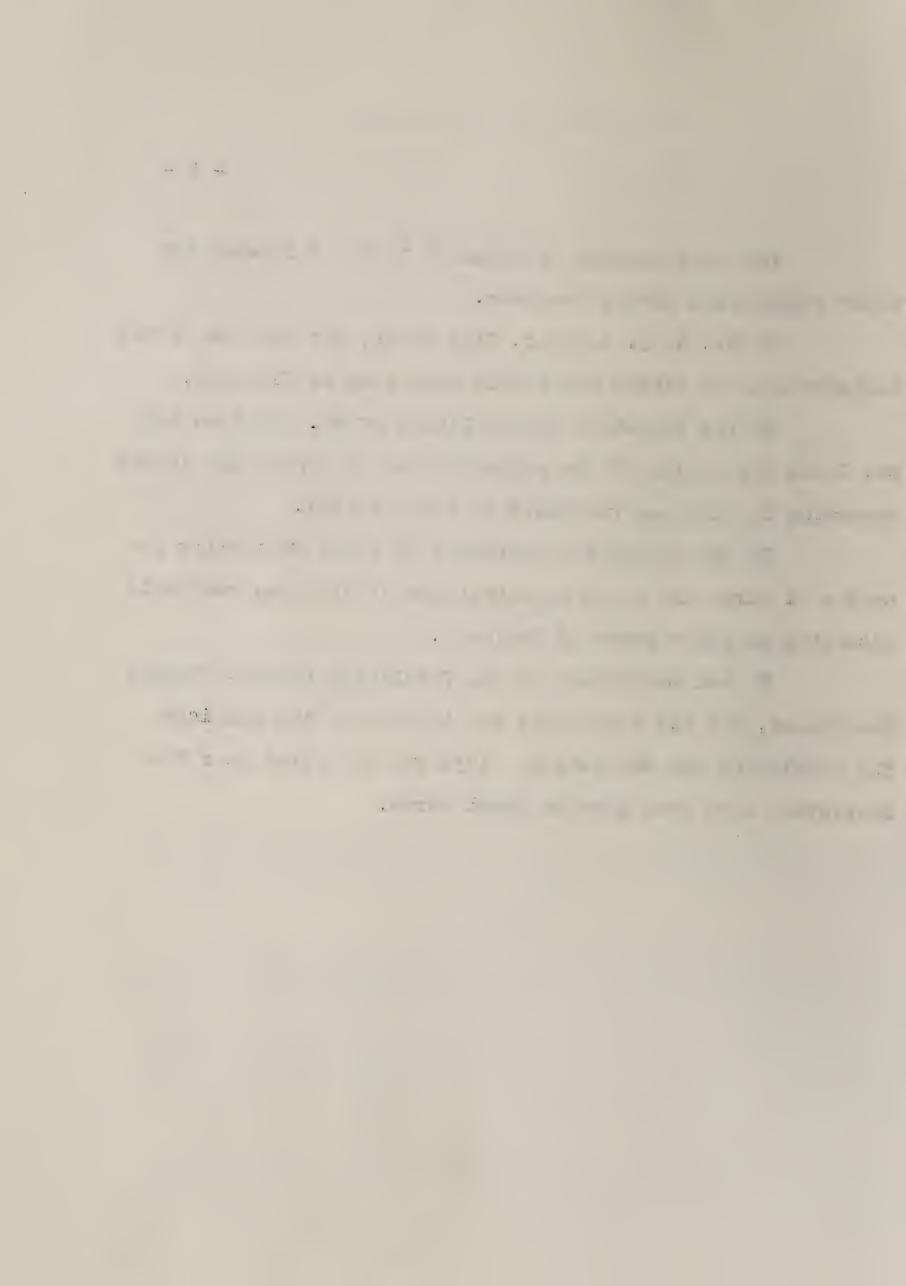
Our appreciation is extended to the following for their cooperation during the year.

To Mr. G. L. Gardner, City Clerk, for the use of the registrations of births and deaths occurring in Winnipeg.

To the Registrar of the Cities of St. Boniface and St. James for copies of the registrations of births and deaths occurring to Winnipeg residents in these cities.

To the Provincial Registrar of Vital Statistics for copies of birth and death registrations of Winnipeg residents occurring in other parts of Manitoba.

To the Supervisor of the Tabulating branch, Finance Department, for his assistance and the use of the machines for tabulating the Statistics. 1958 was the first year the Statistics have been kept on punch cards.



Live Births, Residents Only

Year	Number of Births	Rate per 1,000 Population	Infant Deaths	Rate per 1,000 Live Births
1943 1944 1945 1946 1947 1948 1949 1950 1951 1952 1953 1954 1955 1956 1957 1958	4,294 4,060 4,210 5,532 4,968 5,778 5,965 5,920 6,907 5,908 5,908 5,908 5,908 5,908 5,908 5,908 5,908 5,908 5,908	18.9 17.7 18.2 22.6 23.6 20.4 21.2 21.1 21.9 22.5 23.0 24.3 24.2 23.8 23.8 23.1	197 144 134 184 193 153 137 133 115 131 166 145 147 144 180 155	45.9 35.5 31.8 35.2 34.7 32.0 27.6 26.4 21.9 24.2 29.7 24.4 24.4 24.4 24.4 24.4 24.7 26.3

### Order of Birth by Age of Mother

	10-14 years	15-19 years	<b>20-24</b> years	<b>25-29</b> years	<b>30-34</b> yoars	<b>35-3</b> 9 years	40 & over	Total	% of Total
lst	2	464	967	450	132	49	8	2,072	35.2
2nd		114,	604	568	275	91	16	1,668	28:3
3rd		12	238	362	274	129	23	1,038	17.6
4th		4	72	172	184	106	34	572	9.7
5th			13	72	86	70	10	251	4.3
6th &	Ċ		7	56	89	92	37	281	4.8
Unkno	own					and the second s		10	.1
TOTAL	<u> </u>	594	1,901	1,680	1,040	537	128	5,892	100.0

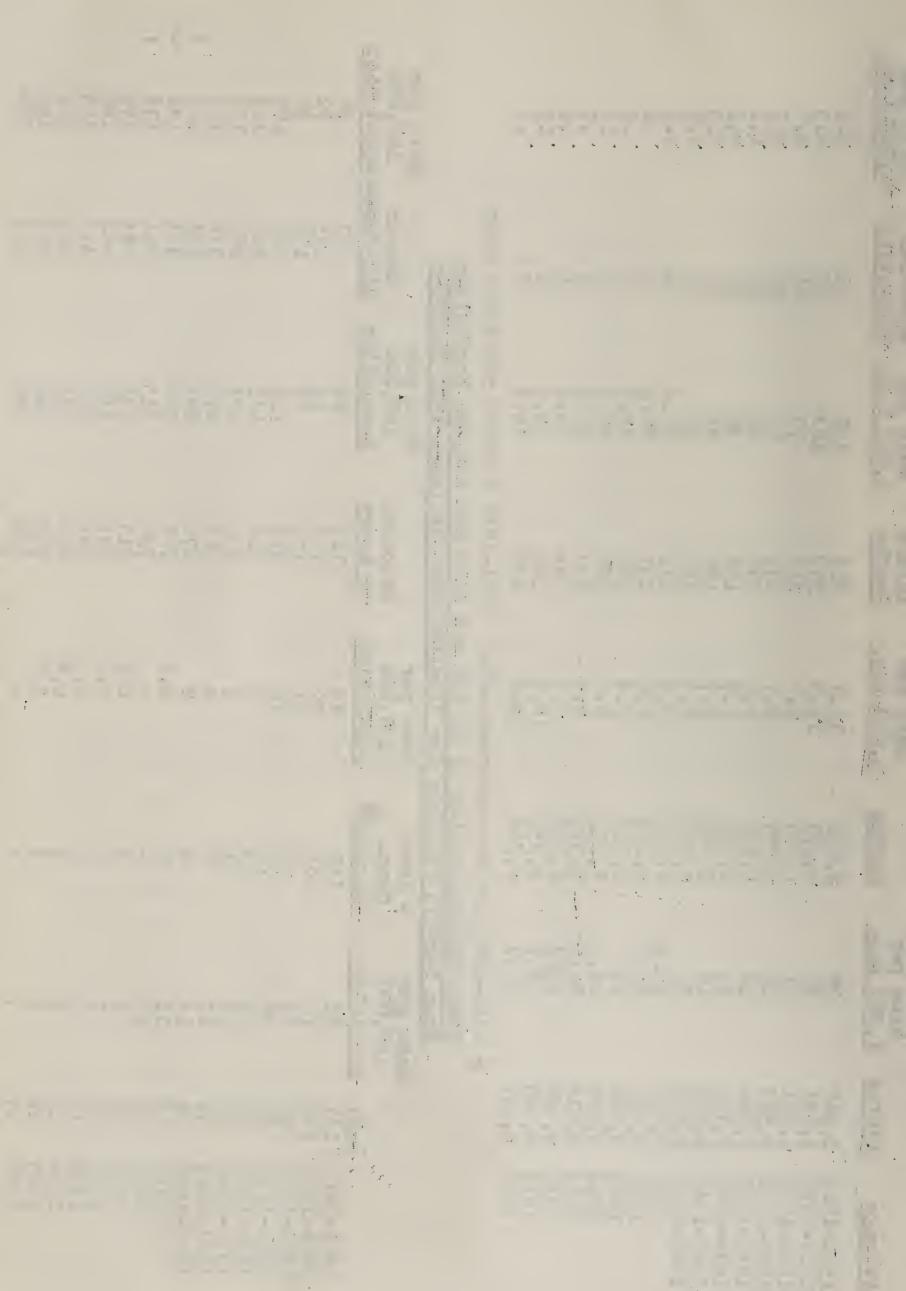
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1911-1958 +	Maternal Mortality	dent dent	ca on All
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r Winnipeg	Infant Deaths	81.3 57.0 41.5 17.0 1.59 1.15.1 1.44 1.80 1.55 1.931–1.958	Rate Per for the of heart of heart 174 233 208 450 615 615 615 616 754 872 872 876 867 958 958
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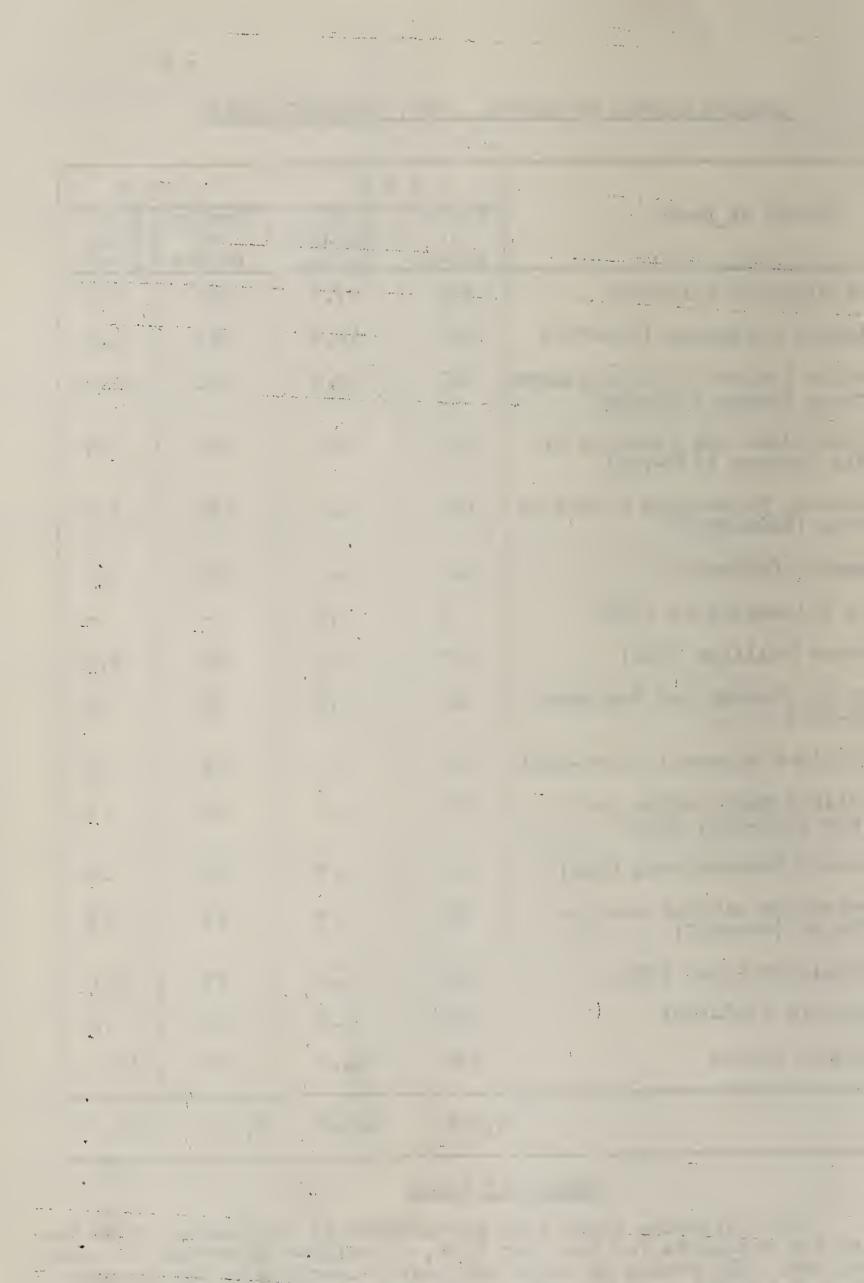


#### LEADING CAUSES OF DEATHS, 1958, RESIDENTS ONLY

	1 9	5 8	1 9	
Cause of Death	Number of Deaths	% of Total Deaths	Number of Deaths	% of Total Deaths
Heart Diseases (410-443)	9 58	37•3	922	36.1
Malignant Neoplasms (140-205)	<b>4</b> 75	18.5	413	16.2
Vascular Lesions Affecting Control Nervous System (330-334)	317	12.4	291	11.4
Malformations and Diseases of Early Infancy (750-776)	127	4.9	144	5•7
Accidents, Poisonings & Violent Deaths (E800-E999)	139	5.4	133	5.2
Pneumonia (490-493)	110	4.3	127	5.0
Acute Poliomyelitis (080)	5	•2	•	
Diabetes Mellitus (260)	22	• 9	28	1.1
Ulcer of stomach and duodenum (540-541)	16	.6	13	• 5
Nephritis & Nephrosis (590-594)	14	• 5	24	• 9
Intestinal Obstruction and Hernia (560-561, 570)	22	• 9	19	• 7
Pulmonary Tuberculosis (002)	17	• 7	22	• 9
Hypertension without mention of Heart (444-447)	10	• 4	13	• 5
Cirrhosis of Liver (581)	21	.8	27	1.1
Bronchitis (500-502)	13	•5	21	.8
All other causes	300	11.7	354	13.9
	2,566	100.0	2,551	100.0

#### Causes of Death

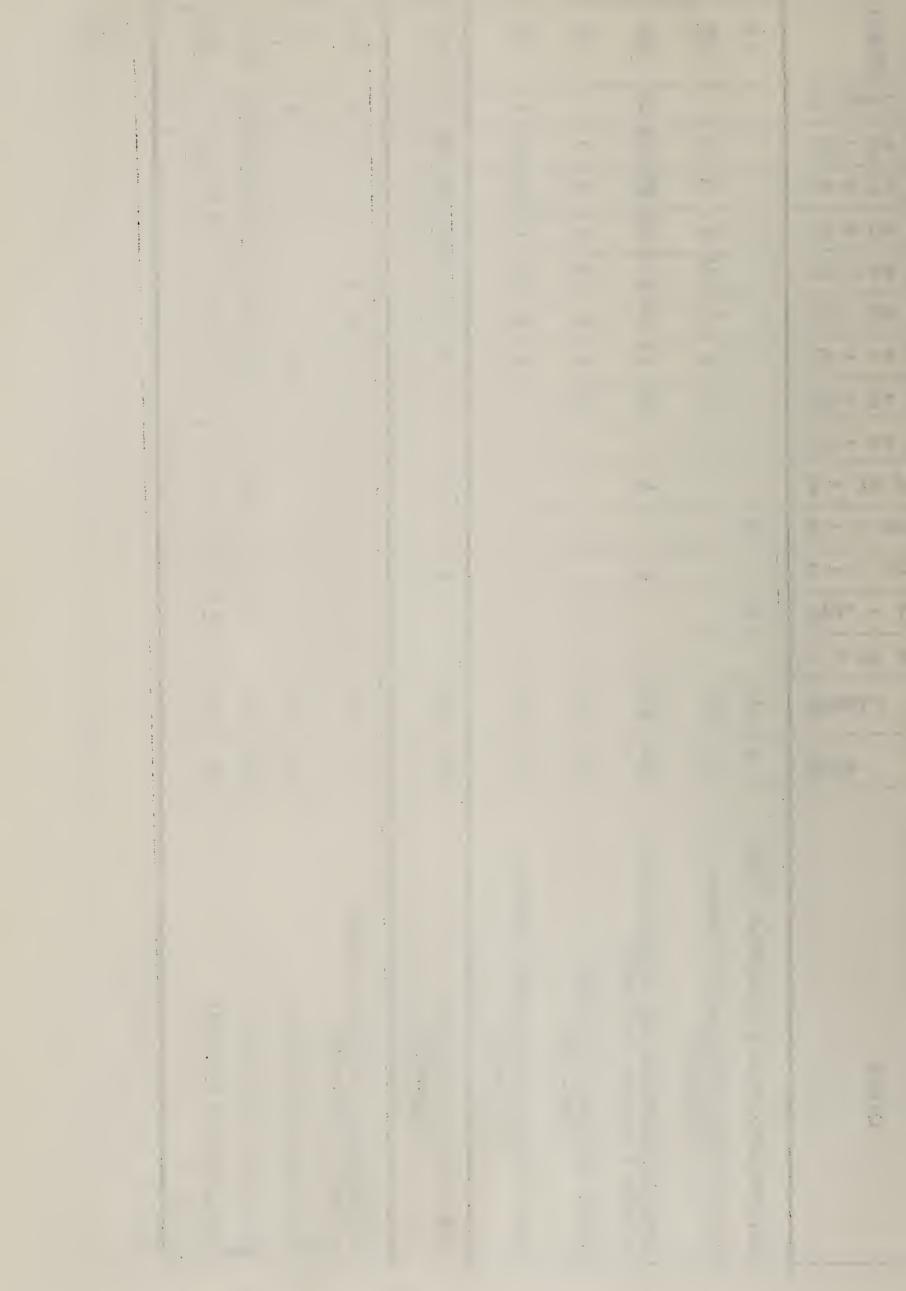
The following pages give particulars of the number of deaths of Winnipeg residents for the year 1958, classified according to cause, age and sex. The causes of death are coded according to the Seventh revision of the International Lists of Diseases and Causes of Death.



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CAUSE	Pulmonary Tuberculosis (002)	Other T.B. of respiratory system (001,003-008)	T. B., other forms (010-019)	Syphilis and its sequelse (020-029)	Lichi	Policipelitis (080)	Malignant neoplasms including neoplasms of lymphatic and	haematopoietic tissues (140-205)	Benign and unpsecified neoplasms (210-239)	Diabetes Mellitus (260)	Anaemias (290-293)	Vascular lesions affecting central nervous system (350-334)

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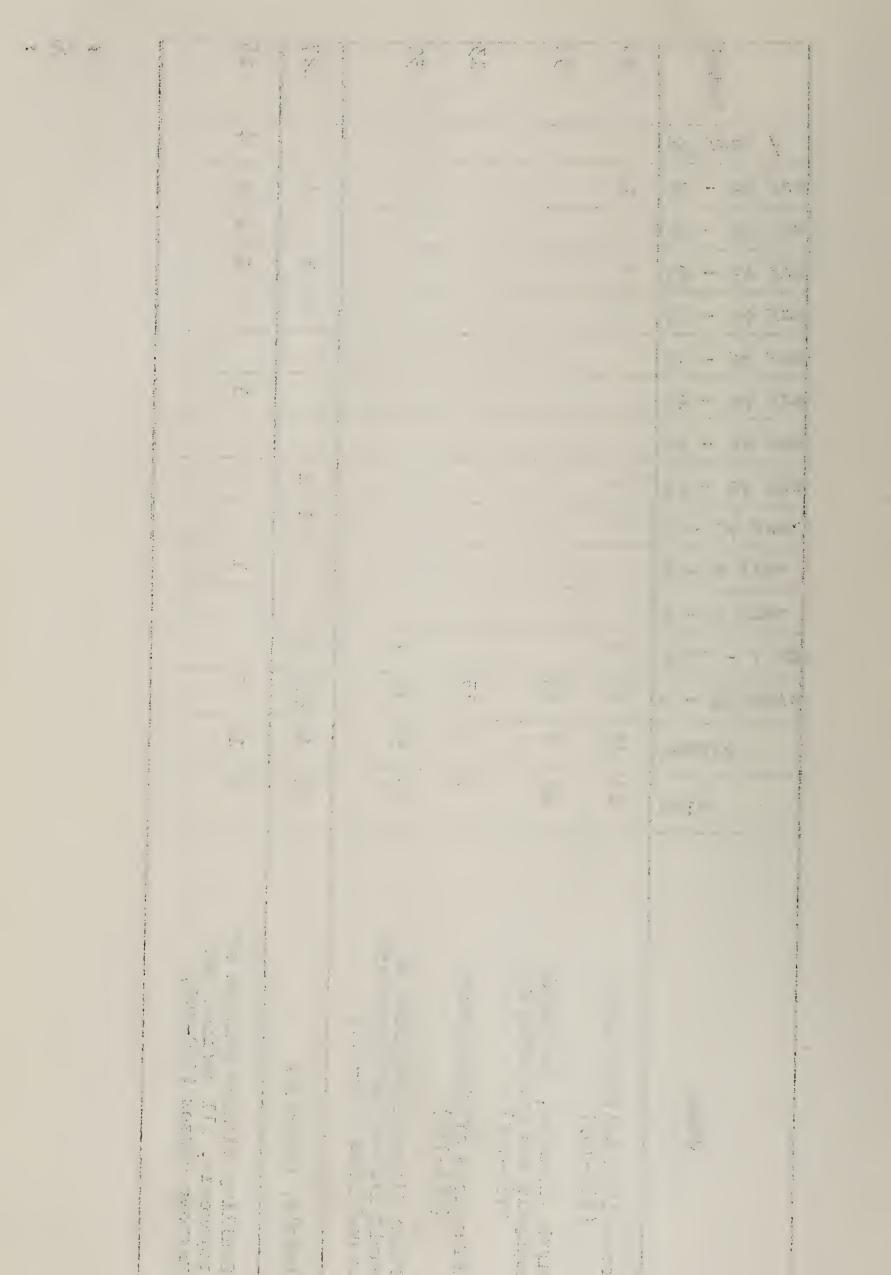
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Cause	Nonmeningococcal Meningitis (340)	Chronic rheumatic heart disease (410-416)	Arteriosclerotic and degenerative heart diseases (420-422)	Other diseases of heart (430-434)	Hypertension with heart disease (440-445)	Total Heart Diseases (410-443)	Hypertension without mention of heart (444-447)	Influenza (480-483)	Pneumonia (490-493)	Bronchitis (500-502)



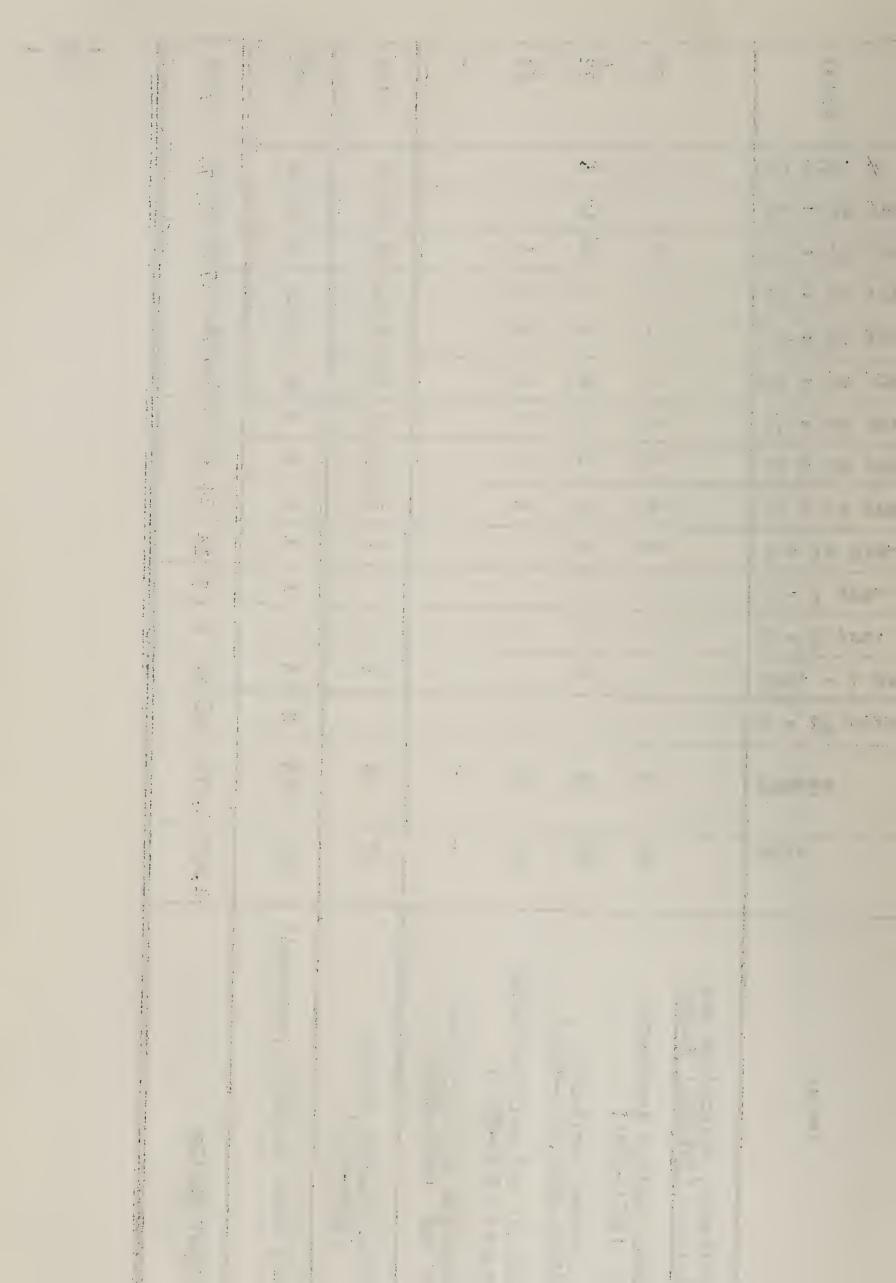
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Male	4	77	12		13	4	п/	~
Cause	Vicer of stomach and duodenum (540-541)	Appendicitis (550-553)	Intestinal obstruction and hernia (560,561,570)	Gastritis, duodenitis, enteritis and colitis, except diarrhoea of the newborn (543,571-572)	Cirrhosis of Liver (581)	Nephritis and nephrosis (590-594)	Hyperplasia of prostate (610)	Complications of pregnancy, childbirth and the puerperium (640-652,670-689)

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enital Malformations (750-759) h Injuries, postnatal 23 9	75 T S S S S S S S S S S S S S S S S S S	- &	7 T	- 3¢	<b>77</b> -	<del>75 -</del>	t9 <b>-</b>	69 -	68 <b>-</b>	·sıń	Total
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asphyxia and atelectasis (760-762)				***************************************	······································						Z Z
Infections of the newborn (763-768)	7			***************************************							7
Other diseases peculiar to early infancy and immaturity unqualified (769-776)	77										52
Totals, (750-776)	114 6		2	H			H	N			12,
Senility without mention of psychosis, ill defined and unknown causes (780-795)	27	Н			r-l			N	7	4	9



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0 - 28 days		************					N	123
Female		9	56	10		42	103	1,076
Male		24	46	27	1	97	137	1,490
Cause	Accidents, Poisonings and Violence (External Cause)	Motor vehicle accidents (E810-E835)	All other accidents (E800-E802,E840-E965)	Suicide and self-inflicted injury (E970-E979)	Homicide and operations of war (E980-E999)	Total Violent Deaths (E800-E999)	All other diseases (residual)	GRAND TOTALS



INFANT DEATHS, WINNIPEG RESIDENTS, FOR THE YEAR 1957 - BY CAUSE, AGE AND SEX

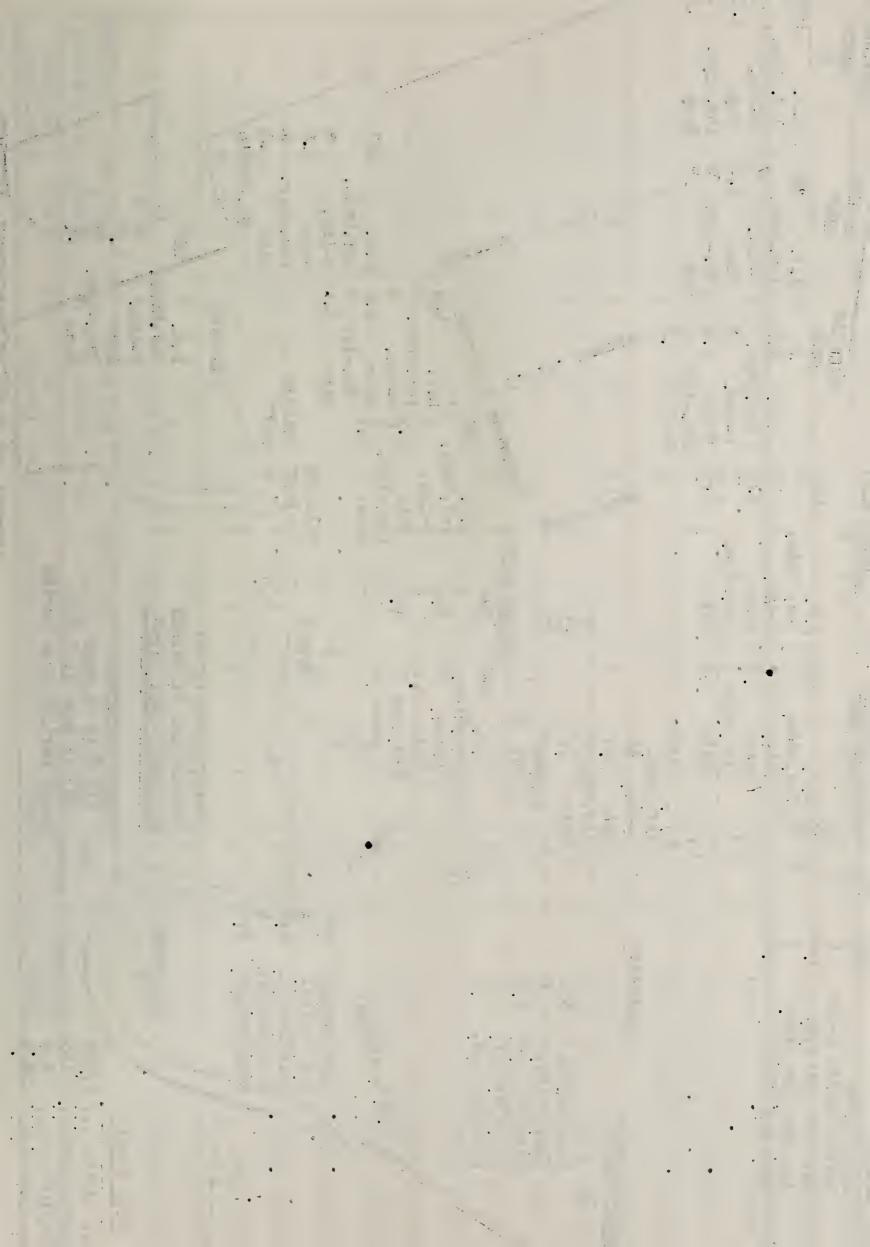
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751	Spina bifida and meningocele	2	Н	Н			•••••••	***************************************		resolds obtinistic to the testing of			H
154	Congenital malformations,	6	Ŋ	4	~	2	•••••••••••	<b>M</b>	•••••	***************************************	01/1501112#/1#14100000		<u> </u>
750,752,753,	All other congenital malfor- mations	12	0	20	9	~	•••••••••	Н	•••••••••••••••••••••••••••••••••••••••	Н	######################################	Н	<u> </u>
760-761	Birth Injuries	50	17	~	17	М	*********	••••••••	444***********************************		r <del>ayan 188</del> 4.44		
762	Postnatal asphyzia and atelec- tasis	75	9	9	9	9		***************************************			***************************************		
763	Pneumonia of newborn	07	7	7	2	~	N	Н	H	Н	wd01122111111111111111111111111111111111		
764	Diarrhoea of newborn	1	1	1	**************	***************************************	••••••	•••••••	************	•••••	[01/]/10/(10 <del>10000</del> 40		*************
768	Other sepsis of newborn	~	N	Н	Ŋ								
770	Haemolytic disease of newborn (Erythroblastosis)	4	77	Н	N	Н	<u> </u>		······		\{\(\)\(\)\(\)\(\)\(\)\(\)\(\)\(\)\(\)\(		*****************
769,771,772	All other defined diseases of early infancy	9	г	Н	4	Н			<b></b>			Н	1 <i>688/1788888</i> 44444444444444444444444444444444
	Ill-defined diseases peculiar to early infancy	6 :	7	4	Γ.	4							
774-776	Immaturity with subsidiary condition or unqualified	33	19	7	6	4		••••••••••		***************************************			
	All other causes	35	24	1.1	9	77						18	Φ
	TOTALS	155	101	54	73	28	Н	5 5	러	2		20	2

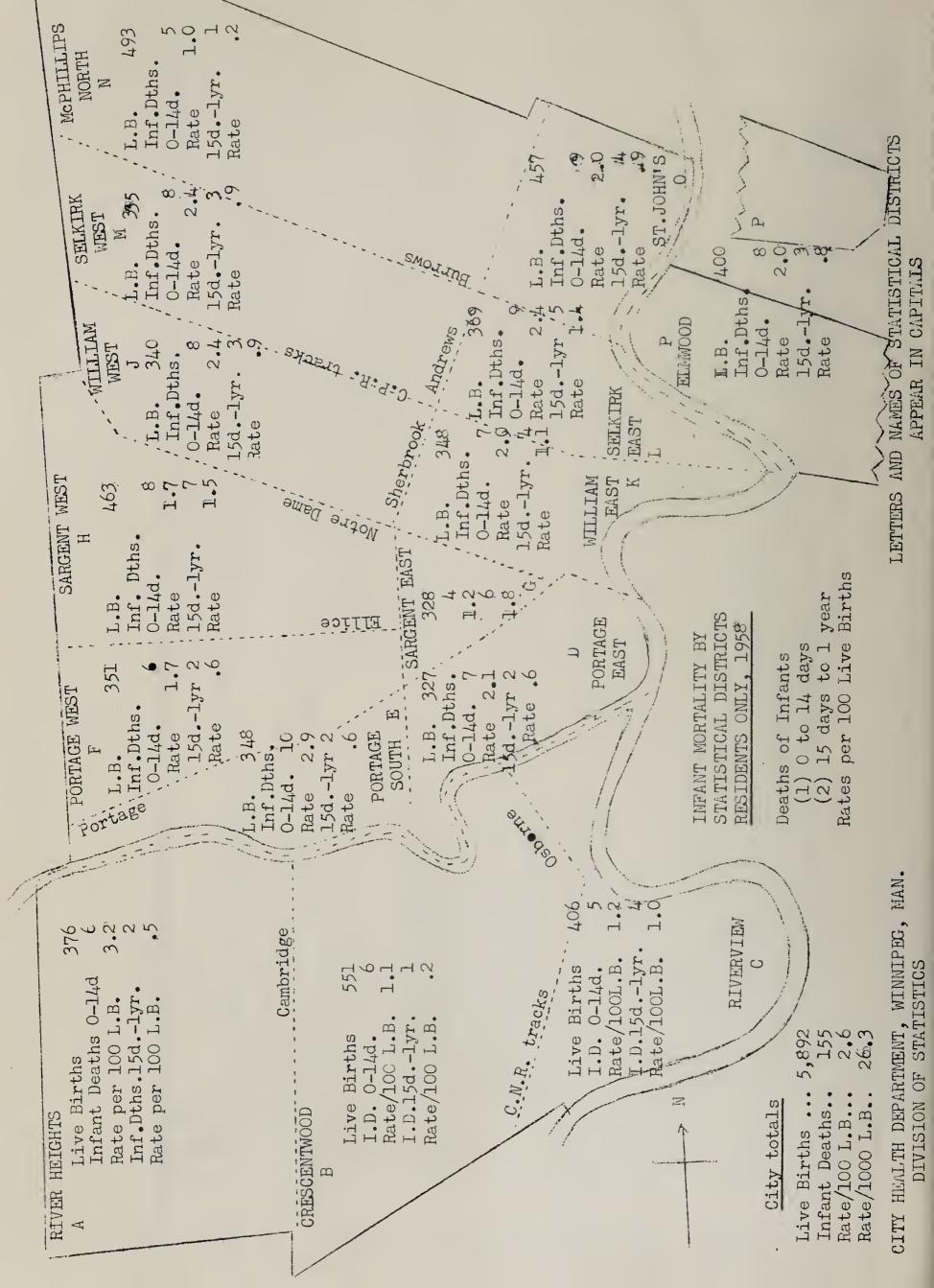
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082	infectious encephalitis	H	H		.>> >5551		•••••			Н	
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331	emorrhage	I			r-1	# * * * * * * * * * * * * * * * * * * *			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
340	Meningitis, except meningococcal and	<u>-</u>	-	•••••••	\$1672 <b>}1077</b> 222	***************************************	***********	************	************	 	11 000000000000000000000000000000000000
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	Bronchopneum	7	9					: 7:60:2017:	**************************************	9	1
2	Pheumonia, other and unspecified	<u></u>		***************************************		Processor Constitution of the Constitution of	***************************************	E	· · · · · · · · · · · · · · · · · · ·		ŧ
				F							Н
-	Other diseases of lung and pleural cavity	,									***************************************
	Hernia of abdominal cavity without	Н	Н		H	*******	*******		••••••		91791111gt
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571	Gestro-enteritis and colitis, except	Ŋ	2	~	**************		•••••		************	K	~~~~~
675	Delivery complicated by prolonged labour	2	2		2		3				
795	Ill-defined and unknown causes or	2	2		Z T			***************************************			
至921	on of food caus	-		-	0						Н
E924	Accidental mechanical suffocation in bed and cradle	<b>-</b> -1		Н	***************************************						
正956	and	H	H							,l	
	TOTALS	35	24	러	2 9					$\infty$	$\infty$

Details of Infant Deaths Listed in "All other causes" for 1953, Residents

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# INFANT MORTALITY, 1958, BY DISTRICTS - RESIDENTS ONLY

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# INFECTIOUS DISEASES - CASES AND DEATHS - 1958

There were 1,323 notifications of infectious diseases in 1958. The total number of deaths was 26 - Tuberculosis - 17 (see Tuberculosis report); Poliomyelitis - 5 (/1 - a Winnipeg resident who died in another Province through acquiring the disease in Winnipeg); Infectious Hepatitis - 3; Encephalitis - 1.

CASES AND DEATHS REPORTED:	CASES 1 9	DEATHS 5 8	CASES 1 9	DEATHS 5 7
Chickenpox	163	<b></b>	224 55	000 000
Diarrhoea, Infantile Diphtheria	89 4	_	20	2
Diphtheria Carriers	nest .	o	11	••
Dysentry, Bacillary	28	7	12	<b>000</b>
Encephalitis, Infectious Erysipelas	<b>3</b> 8	<u>_</u>	1	•••
Hepatitis, Infectious	97	3	91	-
Influenza	9	-	77	9 <b>46</b>
Measles	30 <b>4</b> 6	-	619 10	_
Men. Meningitis Mumps	88		94	•••
Poliomyelitis	77	5	1	~
Paratyphoid Fever	405		61	944 944
Scarlet Fever Tuberculosis, Pulmonary	39	17	61	22
Typhoid Fever	•••	_	1	••
Tetanus	ener		1	646 646
Undulant Fever Whooping Cough	3	_	20	
	7 707	26	1,362	24
Total	1,323	20	1,702	<u></u>

# POLIOMYELITIS

Seventy-six cases of Poliomyelitis were reported in the City of Winnipeg in 1958. Comparison of the figures for the preceeding year shows that this was a minor epidemic year.

1953 -	763	cases	1956		2	cases
1954 -			1957	~	2	cases
1955 -			7 0 5 0		76	cases

Virology study of this outbreak subsequently showed that it was due to Type I Poliomyelitis Virus. Altogether, 73 out of the 76 cases were examined for virus isolation in the faeces or in post mortem material or for virus identification by paired sera. This work was carried out at the Virus Laboratory at the Winnipeg General Hospital under the direction of Dr. J. C. Wilt.

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COMMENT OF STREET

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### The following results were obtained:

No. of Cases examined No. of results	•	•	•	•	•	•		73
Polio Virus Type I	•	•	•	•	•	•	53	
есно 6	•	•	•	•	•	•	1	
Unidentified Virus	•	•	•	•	•	•	1	
Negative Isolation	•	•	•	•	•	•	11	

# CASES BY AGE AND SEX DISTRIBUTION

### TABLE I

Age Group	Total	% of Total	MAL With Paralysis	Without Paralysis	TOTAL	FEM With Paralysis	A <u>LE</u> Without Paralysis	TOTAL
0 - 4 5 - 9 10-14 15-19 20-29 30-39 40 & over	28 13 4 2 20 6	36.8 17.1 5.3 2.6 26.3 7.9 4.0	13 8 2 0 9 3	3 1 0 5 1	16 11 3 0 14 4	10 1 0 1 2 2 0	2 1 1 4 0 2	12 2 1 2 6 2
Total	76	100.0	36	13	49	16	11	27

# AGE AND SEX DISTRIBUTION

Table I shows the age and sex distribution of the reported cases in the 1958 outbreak:

(a) The highest incidence (36.8%) of the disease occurred in

the 0 - 4 year age group.

(b) The lowest incidence (2.6%) of the disease occurred in the 15-19 year age group. In the 1953 epidemic in Winnipeg, the lowest incidence was also in this age group.

(c) Thirty-eight per cent of the cases were in persons 20

years of age or older.

(d) There was a considerably higher incidence in all age groups in males than in females.

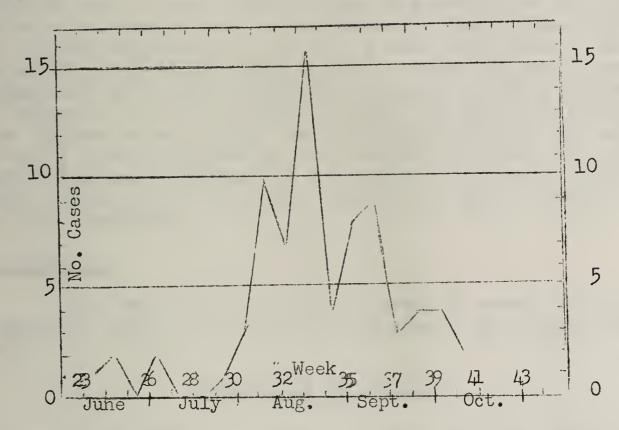
# PARALYSIS - MORTALITY

68.4% of the patients had some degree of paralysis. In the 0 - 4 year age group, 82.1% of cases were paralytic. The outbreak resulted in 6 deaths, giving a mortality rate of 7.9. These occurred in three men, one woman, one five year-old boy and an infant of five months.

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### EPIDEMIOLOGICAL VARIATION

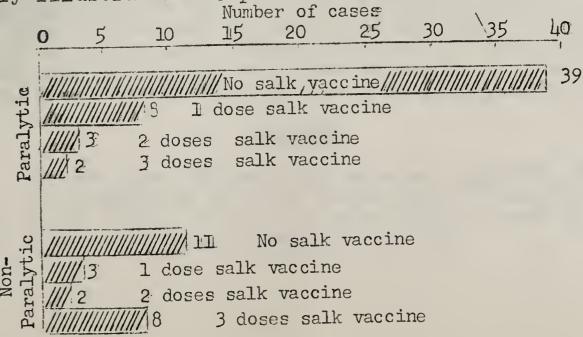
Figure I shows the case reports as notified week by week.



The peak of the epidemic occurred in the 11th week. Up to this week, the rise in the number of cases notified followed the pattern exhibited in previous outbreaks. Thereafter, however, a difference was noted in that a secondary peak occurred in the 13th and 14th weeks. This was coincident with the opening of schools. It was presumed that this peak was due to a carrier state of the virus in the school population (almost 100% immunized) back to the home and subsequent dissemination of the virus in the relatively unimmunized parental population.

# IMMUNOLOGICAL STATUS OF CASES

The value of poliomyelitis immunization in protection against paralysis was amply exhibited in this outbreak. Figure 2 clearly illustrates the protective value of the vaccine.





**-** 20 **-**

There were only two instances of paralytic Poliomyelitis in patients who had received three doses of vaccine. In one of these, there was incorrect spacing of the vaccine inoculation and in the other, there was evidence to suggest an inadequate immulogical constitution. There were approximately 22,000 children in the 2 - 5 year age group. It was estimated that approximately 4,000 in this age group were not immunized and there occurred 20 cases in this number. This would indicate a case rate of 500 per 100,000 population and if this figure were applied to the whole population, some 1,200 cases would have occurred in the community. The fact that this did not occur was presumed to be due to a natural immunity which had been acquired by the adult population as a result of exposure to the 1953 epidemic.

### GAMMA GLOBULIN

This was made available, free of cost, to all house-hold contacts and its protective value was once again demonstrated.

### INFECTIOUS HEPATITIS

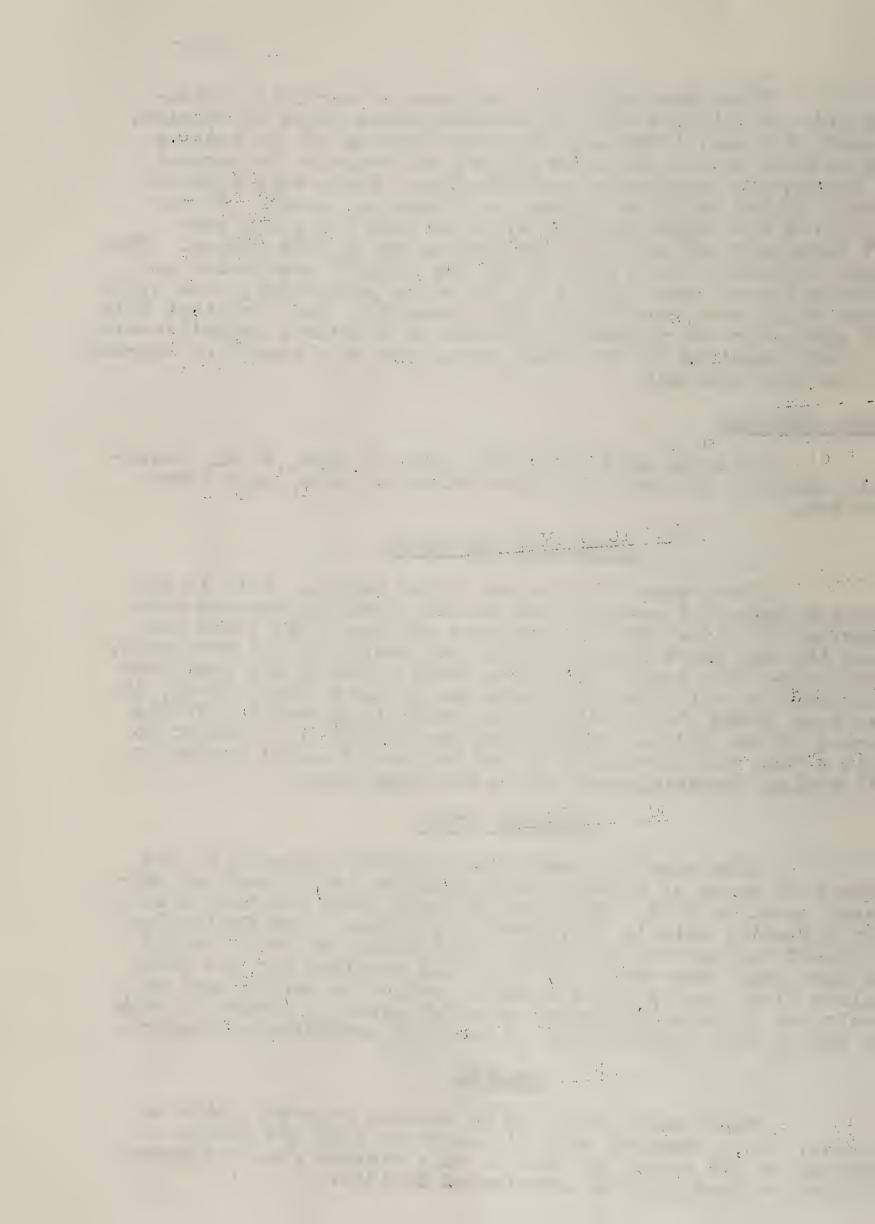
There were 97 cases and three deaths. This is the highest number of cases and of deaths since the records were compiled in 1952. The average over the last five years has been 66, and there have been only two deaths in all the years, preceding this year. Here too, Gamma Globulin has been made available to all direct contacts and if given long enough, it has been found to be highly successful in prevention of the spread of the disease within the home contacts. A letter to this effect was circulated in the Manitoba Medical Review to all Medical Practitioners in the Winnipeg area.

### SCARLET FEVER

This year has seen a considerable increase in the number of cases of scarlet fever notified (405 cases) as compared to 61 in 1957. Universally the disease has been mild and infecting chiefly the school population. The Health Department has adopted the policy that direct contacts should be kept away from school or from food handling for one week, unless given prophylactic tablets (sulpha or penicillin) by their own private physician, in which event, a return to work or school was allowed after 48 hours of prophylactic therapy.

# MEASLES

There were 304 cases of measles reported, with no deaths. This compares with 619 cases in 1957 and yearly average of 580 cases, so that if this disease runs its normal pattern, a peak year is anticipated in 1959.



### TUBERCULOSIS CONTROL 1958

Continued progress in the control of Tuberculosis is reflected in the following report of the Tuberculosis Division of the City Health Department. There were 16 deaths in Winnipeg due to Tuberculosis giving a death rate of 6.3 per 100,000. This compares with 22 deaths in 1957, 21 deaths in 1950, and 52 deaths in 1940. There was a monthly average of 148 patients in the various Sanatoria during the year 1958. This figure, is well below the figures for 1954 (191) and 1955 (166).

The normal procedure of an x-ray survey (4 x 5) of Civic Employees, Public Welfare Clientele, Needle Trade etc., was not carried out as this had been completed in 1957. This will explain why the number of 4 x 5 x-rays taken in 1958 (7,272) is almost half the number taken in 1957. The number of individuals x-rayed by the 70 mm. Unit was also halved as children under 15 were no longer included in the Survey. Tuberculin Tests of all the University Students was done and only the positive reactors were subjected to a chest x-ray.

Opportunities for employees to have a Chest x-ray was provided at 85 sites to 478 offices, business and other industrial concerns. In all there was 84.8% attendance and 25,115 x-rays were taken. A total of 32,387 x-rays were taken by all means during 1958. Seven new cases of Pulmonary Tuberculosis were discovered by this Department. This represents 12.7% of the total number of new active pulmonary cases detected by all agencies such as private physicians, sanatoria, hospitals, private and public clinics and gives a ratio of one new case for every 4,627 individuals x-rayed.

It should be further mentioned that several individuals were found to be suffering from alternative Lung Pathology and Associated Cardiovascular Disease. They were advised to consult their own private physician for further advice or treatment.

# WELFARE INSTITUTIONS FOR THE AGED.

The City Health Department spends a considerable amount of its efforts in the regulation and supervision of welfare institutions. These institutions assume the responsibility of care and supervision of individuals unable to care for themselves. They are licensed by the City of Winnipeg under the Welfare Institutions By-Law. The responsibility of the Health Department is to ensure that physical facilities meet licensing requirements and that adequate care is being administered. These institutions consist of day nurseries, nursery schools, child caring institutions, boarding care homes, and nursing homes. The first three are concerned with care of children and are dealt with elsewhere in the annual report. The latter two care for long term illnesses not requiring active hospital care.

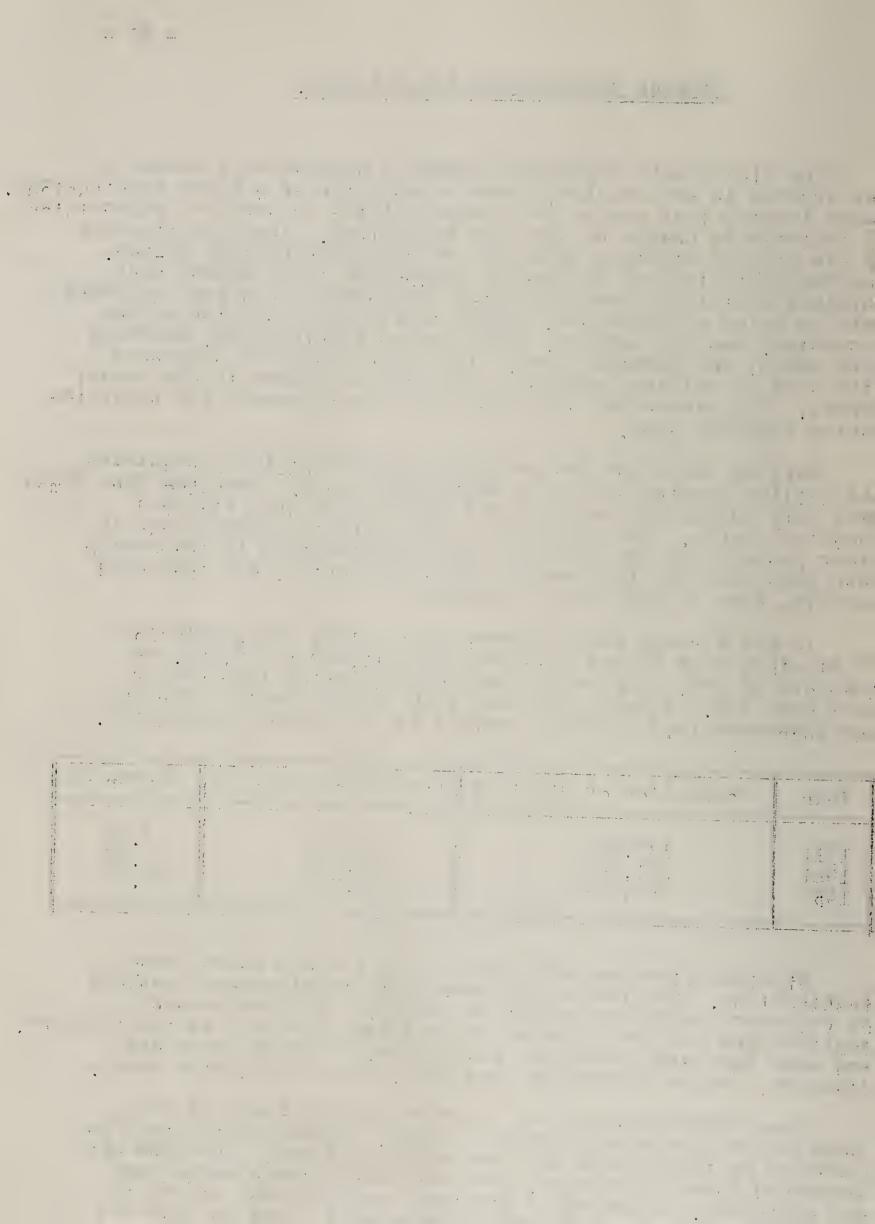
Nursing Homes are for patients with disabilities requiring the skilled nursing care of a registered nurse. Boarding Care Homes need only supply the services and supervision of a licensed practical nurse. The majority of long term illnesses occur in older persons and the need for these institutions is increasing each year with the increase in older population, and increased survival time in long term illnesses.

In the fifteen years between 1941 - 1956 the population of Winnipeg over 65 has increased from 14,142 to 27,727, an increase of 96%, compared to general population increase of less than 15%. Between 1911 and 1956 the population over 65 has increased 14.5 times as rapidly as the general population.

Year	Population of Winnipeg	Population over 65	% over 65
1911	136,035	2,057	1.5%
1941	221,960	14,142	6.4%
1956	255,093	27,727	10.9%

Winnipeg licenses both proprietary and non-proprietary institutions. The latter are non-profit institutions operated by voluntary boards or religious bodies. They are larger institutions and are situated in buildings designed as institutions, and some have very elaborate facilities. Four of these are licensed, one as a boarding care home, three as nursing homes.

Four boarding care, and eighteen nursing homes of the proprietary type were licensed in 1958. These institutions are operated by individuals as a means of livelihood. They are all converted from older homes, some with extensive alterations and additions. A number of Winnipeg residents are placed in two non-proprietary institutions outside of Winnipeg licensed by the Provincial Government.



The Chief Health Inspector and one Housing Inspector carry out all inspections of welfare institutions with regard to environmental facilities.

Two full time Nursing Supervisors are assigned to welfare institutions. These supervisors process placement of patients, supervisenursing services in the institutions, and offer consulting services to the operators, and to families planning a private placement.

All applications for boarding care or nursing home placement with financial assistance by the Public Welfare Department are first referred to these Nursing Supervisors. The patient is visited and all details are gathered, including a medical report from the referring physician. In discussion with a physician of the Health Department a decision is made as to suitability of placement. If placement is not indicated the family is advised on other community facilities. If the patient requires more active treatment than given in a nursing home, referral to a general hospital or to the Municipal Hospitals may be recommended.

496 applications for placement were received in 1958. Of these 239 were placed in nursing homes, and 31 in boarding care homes (only 54% of the applications). 33 were found to be financially responsible for their own placement or non-residents of Winnipeg. 32 were admitted to the Municipal hospitals, and 4 to the Winnipeg General Hospital. 27 were admitted to old folks homes, but many of these were to the Jewish Old Folks Home, which has facilities almost comparable to a general hospital. 130, or over 28% were not placed. Some of these died before placement, some refused nursing home placement and in many the family reconsidered and suitable arrangements were made outside. In addition to the above, many re-admissions were processed.

A register of occupancy of all Boarding Care and Nursing Homes beds is maintained in the department, and this is brought up to date daily by the clerk assigned to the Nursing Home Supervisors.

Each home is visited regularly by the Nursing Supervisors to assist the operator in maintaining good nursing standards. All accidents or unusual incidents must be reported to the Health Department under the regulations of the By-Law. These reports often indicate needs for improved nursing service. All staff changes are reported to the Health Department and supervision is maintained to ensure adequate staffing.

The nutritionist of the department spends much of her time on these homes. She acts as a consultant on nutrition, giving advice on meal planning and preparation. Regular visits are made to the homes to see the meals are served and give advice.

6 · · ·  All public patients in nursing homes who are residents of Winnipeg receive medical supervision by physicians of the department. They are visited regularly every 7-10 days and at any time in between if indicated. Laboratory specimens are now collected and are examined at the Provincial Laboratory through arrangements made during the year. There are frequent referrals of patients to the facilities of the out-patient departments of the Winnipeg General and St. Boniface Hospitals. Patients are moved to the general hospitals and to the Municipal hospitals when the move seems advisable.

By arrangements with the Sanatorium Board of Manitoba, a mobile x-ray unit visits each nursing home at periodic intervals to x-ray all staff and patients. The last such survey was made in the spring of 1958.

### MEDICAL CARE

The Health Department provides medical care to indigent persons under certain circumstances. The first group are those Winnipeg residents who are public patients in nursing homes. These people are cared for by physicians of the department and all medication is supplied by the pharmacy of the Municipal Hospitals.

Medically indigent persons at home who can get about are referred to the outdoor departments of the Winnipeg General Hospital and St. Boniface Hospital for all medical care. This is comparable to visiting the doctor's office. It is the most desirable place to carry out a medical consultation, as both facilities and records assist the physician to render his best service. However, in some emergencies, just as in private practice, a house visit is required. Sometimes this is recommended after a visit by a public health nurse, or by a nurse of the V.O.N. At other times the call comes directly to the Health Department as an emergency. In these circumstances home visits are made by physicians of the department. 1,513 home calls were made during 1958.

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# PUBLIC HEALTH NURSING BRANCH 1958

### CHILD CARE SERVICES

Child care services continue to occupy a considerable portion of the time and personnel of the City of Winnipeg Health Department. These services include:

- 1) The follow-up care of newborn infants, particularly premature babies
- 2) Classes for expectant mothers
- 3) Child Health Conferences
- 4) Follow-up of accidents reported by the Poison and Accident Centre,
  Children's Hospital
- 5) Medical appraisal and supervision of the health of the school child
- 6) Immunization of pre-school and school age children
- 7) Licensing and supervision of Day Nurseries and Nursery Schools

# Maternal and Infant Health

Five thousand, eight hundred and ninety-two (5,892) births occurred to Winnipeg residents in 1958. Four maternal deaths occurred. There were one hundred and fifty-five (155) deaths of infants under one year of age (26.3 per 1,000 live births) and of these one hundred and twenty-three (123) (20.9 per 1,000 live births) were under one month.

The public health nurses made eleven thousand, one hundred and thirty-five (11,135) home visits to children under one year to give advice and demonstrations to mothers about general care and feeding. Improved cooperation with private physicians and hospitals also enabled the public health nurse to carry out a more effective follow-up program for premature infants.

In 1958, public health nurses conducted an average of 9 classes for expectant mothers each week. A total of five hundred and thirty-four (534) pregnant women attended.

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### Child Health Conferences

Ten Child Health Centres provide weekly services to children under school age not receiving medical care due to economic or geographic reasons. In addition to having their child's health appraised by qualified paediatricians, the parents receive advice and anticipatory guidance from both doctors and public health nurses on feeding, normal growth and development, and minor behaviour problems. Children with correctable defects are referred to hospital clinics or private physicians for the necessary care. The follow-up of defects found at these Centres is carried out by the public health nurses through home or telephone visits. In 1958, one thousand, eight hundred and thirty-nine (1,839) children were reviewed at these Centres.

An extensive program of immunization against smallpox, diphtheria, whooping cough, tetanus, and poliomyelitis is carried out at the Child Health Centres. In 1958, twenty-nine thousand, six hundred and six (29,606) inoculations were given.

# Follow-up of Poison Control Cases

One hundred and forty-five (145) visits to cases of poison were made by public health nurses in 1958. This service is carried out in cooperation with the Poison and Accident Control Centre at the Children's Hospital. The purpose of the visit is not only to obtain more detailed information about the cause of the accident but also to institute educational measures that might prevent future accidents from occurring because of carelessness, ignorance, or neglect.

# School Health Services

Continued efforts have been directed towards concentrating medical and nursing time on school children presenting health problems that might effect their educational progress. This is being brought about by the gradual elimination of the routine physical examination and improved and frequent liaison with the

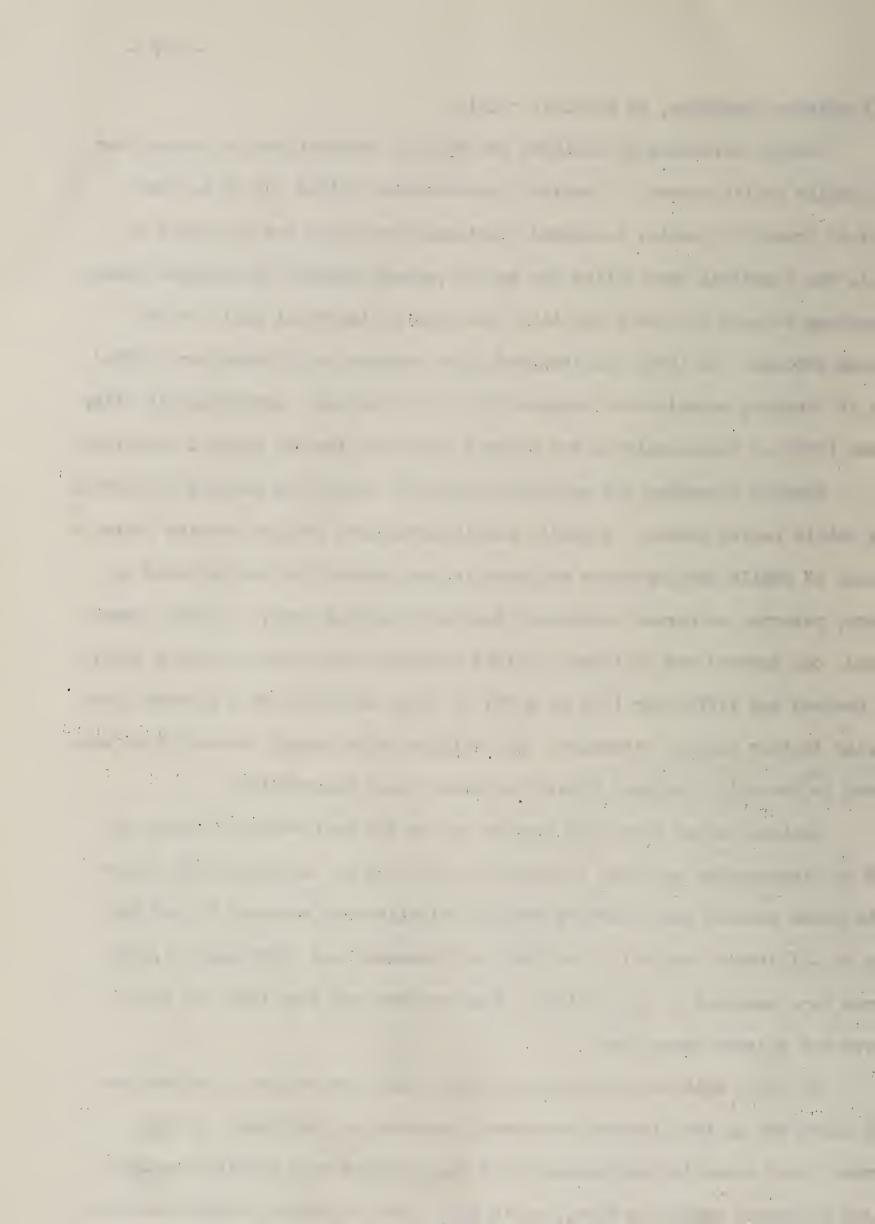
child's private physician, or hospital clinic.

Careful screening of children for medical examinations is carried out by the public health nurses. A medical questionnaire filled out by all the parents of Grade VII pupils, a medical questionnaire filled out by pupils in Grade X, and a medical form filled out by the private doctors of children entering Winnipeg schools for the first time, are used as important media in the screening process. In 1958, six thousand, nine hundred and thirty-four (6,934) pupils in Winnipeg schools were examined by school doctors. Approximately fifty per-cent (50%) of these children had defects requiring further medical attention.

Regular screening for possible defects in vision and hearing is carried out by public health nurses. A public health nurse does routine hearing tests on all Grade IV pupils and any other children in the schools who are referred by teachers, parents, or nurses because of suspected hearing loss. In 1958, seven thousand, one hundred and sixty-one (7,161) children were given a hearing test. Three hundred and fifty-four (354 or 4.9%) of these children had a hearing loss requiring further medical attention. All children with organic hearing loss were referred to the Child Guidance Clinic for educational supervision.

Routine vision tests are carried out by the public health nurses on pupils in Kindergarten or Grade I, Grade IV, VII, and X. Children with vision defects whose parents cannot afford private attention are referred to the Eye Clinic at Children's Hospital. In 1958, one thousand, and fifty-nine (1,059) children were examined at this clinic. Four hundred and four (404) of these children had glasses prescribed.

In 1958, with the cooperation of the Health Department, the Winnipeg School Board set up two classes for visually handicapped children. Before placement, each visually handicapped child was reviewed by a special committee composed of School Administrators, Health Department Officials, Opthemologists, and the Psychiatrists of the Child Guidance Clinic. Only children with 1/3 or



less vision with correction, who were not able to progress favourably in the regular classes were recommended for placement. In 1958, twenty-four (24) children were recommended.

In addition to vision and hearing handicaps the Health Department has also given considerable attention to school children with heart murmurs, endocrine disturbances, and convulsive disorders.

Since the City Health Department established a diagnostic cardiac clinic in the Children's Hospital, two hundred and thirty-four (234) school children have been reviewed. One hundred and thirty-five (135) of these children have been delabeled as cardiacs. A definite diagnosis and plan of treatment has been made for ninety-nine (99) other children. Of these ninety-nine (99), four have had surgical treatment, eighteen others have had special tests such as catheterizations of the heart.

A registry for handicapping conditions in school children has been set up in the Central Office, City Hall. In 1958, two hundred and sixty (260) diagnosed heart cases were registered. One hundred and thirty-two (132) of these cases have congenital heart disease and one hundred and twenty-eight (128) have rheumatic heart disease. In the majority of these cases, no restriction of school activities has been necessary.

In 1958, the City Health Department on written authorization of the family doctor, supplied a daily dose of four hundred thousand (400,000) units of penicillin to one hundred and eleven (111) school children diagnosed as rheumatic heart cases.

In addition to cardiac, vision and hearing conditions, the central registry in 1958 also included detailed information on twenty- eight school children with diabetes and fifty school children with epilepsy. An annual review of the medical condition and the educational progress of these children is carried out.

During 1958, protection against Diphtheria, tetanus, and smallpox was offered to all children in Kindergarten or Grade I, and pupils in other grades who had not received primary or reinforcing inoculations. Poliomyelitis vaccine

the design of the same of the  was administered with parental approval to high school students in 1958. On the completion of this program, approximately 100% of the school population had received primary inoculations against poliomyelitis.

To improve the school health program regular meetings were held between School Administrators and the Official of the Health Department. In addition, the Consultant on Child Care Services spoke at a School Board Meeting and attended several principal-teacher meetings. Members of the Nursing Division interpreted the various school health services at the teachers' convention, principal-teacher meetings, and parent-teacher meetings.

In-service education programs on matters relating to school health were held throughout the year with school physicians and public health nurses.

# Day Nurseries and Nursery Schools

In 1958, the Health Department licensed and supervised six Day Nurseries caring for approximately one hundred and sixty-five (165) children and fourteen Nursery Schools caring for approximately four hundred and ten (410) children. Due to the number of working mothers, there has been an increased number of applications to operate Day Nurseries. These institutions according to the Welfare By-law may care for three or more children for a period in any day exceeding three hours. A number of applications were refused in 1958 because the regulations under the Welfare By-law could not be met.

# DIVISION OF CHILD MEDICAL SERVICES

# ACCIDENTS REVIEWED

Total number accidents reported by Principal	and Nurse .	• • • • • • • • • • •	. 1,105
COMMUNICABLE DISEASES IN SCHOOL CHILDREN	1957	1958	
Total number of chickenpox Total number of measles Total number of mumps Total number of scarlet fever Total number of whooping cough Total number of poliomyelitis	146 387 60 37 8 2	82 147 61 327 1 18	
REPORT ON HEALTH INSPECTION OF SCHOOL CHIL	LDREN BY PUB	LIC HEALTH NUI	RSES
Pupils examined in Health Service Rooms by no	urses	• • • • • • • • • • •	. 23,690
Exclusion from school  Miscellaneous  Pediculosis  Skin conditions  Suspect communicable disease	2,488 171 573	,117	
Treatments given	16	,040	
Classroom Inspections by school nurse  General	1	,828	. 2,040
Conference re pupil (with pupil, parent, tead	cher, etc.)	• • • • • • • • • • •	. 91,403
Health education	• • • • • • • • • •		. 2,222
Home visits to school children made by nurses cable disease	s (exclusive e visits)	of communi-	. 8,212
PHYSICAL EXAMINATIONS OF SCI	HOOL CHILDRE	<u>IN</u>	
1. Total number of children examined by medical	cal examiner	'S	6,934
2. Total number of children with one or more			
3. Total number of parents invited to physical			
4. Total number of parents present at physical			

.....

### DIVISION OF CHILD MEDICAL SERVICES

OCULIST'S REPORT 221 Number of clinics held ..... Number of children examined: New ..... 496 Re-examined .... 563 ............ 1,059 1. Refractions completed ...... 580 2. Refractions not completed ...... 291 3. Refractions not needed ...... 22 4. Returned for observation ...... 166 580 Completed Refractions ..... Glasses prescribed ..... 404 No change in prescription ..... 40 Children found with 1/3 or less of normal vision with glasses. 3 Glasses discontinued ..... 5 Referred to Orthoptic Clinic ..... 32 AUDIOMETRY REPORT First tests ..... 5,920 Re-tests ..... 1,241 Number of defects ..... 354 Teachers and others tested ..... 47

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## DIVISION OF PUBLIC HEALTH NURSING

Personal Services to Patients by Public Health Nurses
(Including visits and instruction by telephone from District Office)

Health:	Newborn	5,389
	Under l year	5,746
	Pre-school children	10,509
	School children	8,212
	Adults	7,595
Pre-Natal		805
Post-Nata	al	5,312
Attendanc	ce at Pre-Natal Classes	3,309
Morbidity	7: Tuberculosis	1,460
	Acute Communicable	287
Unclassif	fied: Not found	4,407
	Not taken under care	108
	Special activity	673
No. visit	ts made for poison control prevention	133
	TOTAL	53,945
Salvation C.G.I.T. Y.M.C.A.	CHILDREN EXAMINED FOR FRESH AIR CAMPS ton Army	249 215 116 204 150
Y.M.H.A. United Challed Logan Net Lakeside Norquay Nor	hurch ighbourhood House Camp Neighbourhood House Zedek orah	170 247 90 180 51 196 60

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## DIVISION OF PUBLIC HEALTH NURSING

## Child Health Centres

	Child Health Centres
No. of	new babies admitted
Total a	Infants
No. of	doctors' consultations and examinations 5,686 Infants
No. of	home visits re child hygiene (birth registrations, etc)21,644
No. of	immunizations by doctors at Child Health Centres 29,606

## ATTENDANCE AT CHILD HEALTH CENTRES

Harrow 4,8	840 for	15 afternoons
St. Matthews 4,0	048 for	13 afternoons
St. Judes 3,	743 for	13 afternoons
Sparling	127 for	13 afternoons
St. Andrews 3,4	406 for	14 afternoons
Holy Trinity	557 for	13 afternoons
Chalmers 2,	419 for	12 afternoons
Mount Carmel Clinic	747 for	13 afternoons
Robertson House, 3,	973 for	12 afternoons
Stella Mission	746 for	12 afternoons

.....

## VICTORIAN ORDER OF NURSES SERVICES SUMMARY FOR THE YEAR 1958

Total number	of new cases	2,341	'e , ::
Nursing Care	Visits:		
	Pre-Natal	93	
	Post-Natal	35	
	Newborn	549	
	Infant	120	
	Pre-school	96	
	School	69	
	Adult	37,079	
	Total Nursing Care v	isits ·····	38,041
Health Instr	ruction Visits:		
	Pre-Natal	49	
	Post-Natal	515	
	Newborn	504	
	Infant	542	
	Pre-school	32	
	School	, 22	
	Adult	546	
Not Seen	Total Health Instruc	ction visits	2,210 607
	f patient		28
Oll pellatt, or	peroximo		
	TO	TAT	40,886

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### CHILD DENTAL SERVICES BRANCH

After a year of operation under the guidance of a full time Director many changes and improvements have been made in the City of Winnipeg's Child Dental Services. The success of this project has been the result of a combined effort on the part of the school nurse, the teachers and staff of the Winnipeg School District No. 1, and the agencies providing funds for expansion and development.

During the year the Division undertook a dental inspection program for a selected group of children. A mobile dental unit was introduced for use in schools where a concentration of indigent children were known to attend, and a second two chair dental clinic and administrative office was established in the North Nursing District. A dental survey of some 1400 children of all ages was conducted with the sample inchildren from the three income groups (low, medium, and high) in order to obtain information on the over-all dental health picture.

The Dental Division played an active part in the promotion and organization of Dental Health Week. Consultant service was offered to the Municipal Hospitals and the School for Retarded Children. A booklet, "Aids in the Prevention of Tooth Decay" was prepared for distribution and two reports of surveys conducted were prepared - "Survey of Winnipeg Cahool Children's Dental Health 1958", and "A Dental Health Report on Retarded Children in Greater Winnipeg".

Staff: The Division's staff includes one director, three clerks, ten part-time dentists, one full-time dental assistant (RN) and four part-time dental aides.

Dental Treatment:

The program was limited in complete dental coverage to the extent of facilities available for indigent to pre-schoolers, Kindergarten, and Grade I children, Social Welfare children, plus dental emergency treatment for the older indigent age group. The demands on this scheme far exceed the present resources. The Clinic remained open during the summer holidays on a near capacity basis which helped to relieve the rush for emergency dental work at the opening of school in the fall.

### School Dental Examinations:

School dental examinations included children in Kindergarten, Grade I, and Grade II with a total of 5,312 children being examined. Notifications of dental requirements were sent home with the children, as well as a questionnaire to the parents of Kindergarten and Grade I children as to whether they were under dental supervision or required assistance under the City's indigent dental clinic service. The fall school term dental examinations were conducted in the North and East Nursing Districts (25 schools, 4,140 children). The 1957 survey showed 19% of Grade I children eligible for City Dental Services, the increase to 28% in 1958 is accounted for in that the two other Nursing Districts are not fairly represented. (2,479 Grade I examined, 692 approved)

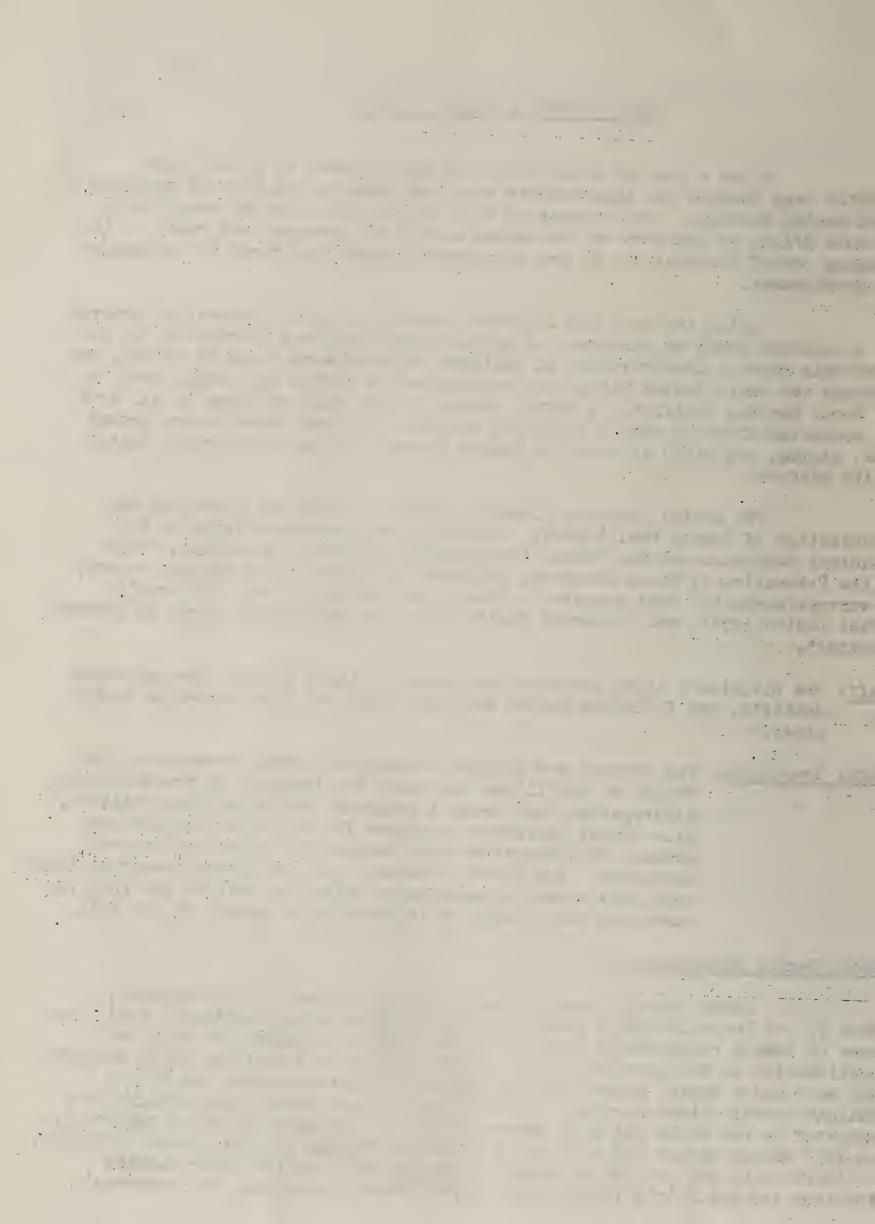


TABLE I

SCHOOL DENTAL INSPECTIONS 1958

(Number of children)

Grade	Examined	No noticeable Caries	Attending Dentist	Request Treatment	Nurses Approval
Kindergarten	1,438	389	985	296	275
Grade I	2,479	464	1,563	791	692
Grade II	1,395	190		_	-
TOT AL	5,312	1,043	2,548	1,087	967

### Definition of Criteria:

No noticeable caries - caries treatment alone completed or never needed.

Attending dentist - no caries defect or no reply to the questionnaire by the parent.

Request treatment - answer to questionnaire by the parent.

Approval for treatment - School nurse identifies children who are classified as indigent.

## Clinical Treatment Service

The Department of Health provided dental treatment for indigent and under-privileged children up to the age of 16 years. Limitations of the extent of coverage was necessary to obtain the maximum of return from the funds provided. Emphasis was placed on comprehensive dental treatment for children up to Grade I and children on Social Welfare. The demands for service on the clinics only allowed for 37% of the children to be dentally completed to the date of their last appointment.

TABLE II

SUMMARY OF DENTAL TREATMENT GROUPS 1958

(Number of Children)

	Pre-school	Kindergarten	Grade I	Grade II	Older Ages	Total
No. Patients	90	274	809	285	973	2,431
No. completions	47	125	336	108	295	911
•						

During the year, 2,431 children were treated in the course of 5,112 clinic attendances. Of this number, 911 patients received complete dental caries care.

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Section 18

### Analysis of Clinical Services

<pre>X-rays (single films) Extractions - Deciduous Teeth</pre>	2,341 672 3,576 3,472 2,171 198
Refused appointments (non-co-operative) Cancelled appointments	54 158 450
No. of Dentist 3 hour sessions	1,439

### Dental Clinics

2 Chair Clinic - School Board Offices
2 Chair Clinic - William Whyte School

1 Mobile Unit - servicing LaVerendrye and David Livingstone Schools.

### Dental Surveys

### 1. Winnipeg School Children's Dental Health 1958

The purpose of this survey was to establish immediate data and information on the Dental Health of the school children of Winnipeg. Previous to the survey, little information was available and few records were kept. It was necessary to obtain some base line material upon which to establish a dental program. The aspects of economy was a necessary consideration in conducting the survey and the utilization of staff to a maximum. Schools selected included representation from the three income groups.

TABLE III

COMPOSITION OF SURVEY SAMPLE
WINNIPEG SCHOOL CHILDREN 1958

		Total sample	size
Schools	Males	Females	Total
A low income B low income	78 165	73 137	151 302
C medium income	242	242	484
D high income E high income	151 75	186 68	337 143
TOTAL	711	706	1,417

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TABLE IV
DENTAL STATISTICS 1958

DENIMAT TRIDEV	AGES 6 - 8		AGES 9	_ 11	AGES 12 - 14	
DENTAL INDEX	AGEO O - O		AULIO /			
NO. OF PERSONS EXAMINED		36		+3	479	
	Total	%	Total	%	Total	76
1. No Dental Defects	46	10.55	39	8.80	39	8.14
2. No Caries Defect	76	17:43	75	16.93	79	16.45
3. Visited Dentist	297	68.11	347	78.33	370	77.2
4. Decid. Tooth Mortality	225	51.65	131	29.50		
5. Perm. Tooth Mortality	11	2.52	59	13.22	143	30.27
6. Perm. & Decid. Teeth Needing Restoration	1932	Avg. 4.43	1252	Avg. 2.82	1536	Avg. 3.206
7. Space Maintainer	2	.0004	2			
O. i Error Children						
Caries Free Children 8. Deciduous Teeth	38	% 8.71	132	% 29:79	411	K
9. Permanent Teeth	130	29.81	15	3.88	11	2.29
10. Perm. & Decid. Teeth	28	6.42	8	1.70	10	2.09
11. D.M.F. Teeth	875	Avg. 2.006	1767	Avg. 3.88	3417	Avg. 7.13
12. Def. Teeth	2673	6.113				
13. D.M.F. plus def. teeth	3548	8.139				

## 2. Retarded Children's School Dental Health Report

A questionnaire was used to gain general information from the child's parent or guardian, and a dental examination was conducted for the children attending the school. The results were turned over to the authorities of The Retarded Children's School for future reference and planning.

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AGE GROUP REPORT OF DECIDUOUS AND PERMANENT TEETH
(Number of Children)

Age	Total		Decid	uous			Perma	anent		
	Examined				to be				to be	
		Caries	Filled	Lost	Lost	Caries	Filled	Lost	Lost	
6	8	7	-	2	2	4		-	-	
7	9	6	1	3	2	4		1	_	
8	4	3		-	-	2	1		-	
9	4	2	1	2	1	3	1	-	1	
10	5	3		-	4	4	2	1	2	
11	11	1	-	_	2	10	2	5	4	
12	8	2	1	-	1	8	3	2	2	
13	5	1	_	-	-	5	3	1	2	
14	5	-	_	-	1	4	1	2	3	
15	3		_		-	3	-	1	-	
16	2	1	_	-	_	2	1	2	1	
17	3	_	-	-	_	2	1	2	2	
18	2	_	-	_	-	2	1	2	1	
	69	26	3	7	13	53	16	19	18	

These children are in urgent need of dental attention. The presence of some fillings and premature loss of both deciduous and permanent teeth indicates that some dental work has been attempted. The sample of children used represents a select group of retarded children and the findings represent only a minimum of dental requirements of this unfortunate segment of the population. It is fair to assume that those children less fortunate in not being able to attend this institution would show an equally bad or worse report.

## DENTAL HEALTH WEEK - April 12th - 19th, 1958.

Considerable time was spent in assisting the promotion of Dental Health Week. The city schools took an enthusiastic interest in the project. Material used in the classrooms up to Grade VI was written by the Dental Division staff - a Dental Playlet and a Tooth Care Diary.

### SUMMARY

The City of Winnipeg Health Department's Dental Program is designed primarily for pre-school and school children. Improvement in dental health conditions is attempted by making use of known control measures and to reduce the complications of dental disease by encouraging early and regular dental care. The City provides dental clinics for indigent and under-privileged children with a staff of dentists equivalent to three full-time dentists. Sufficient dental personnel is not available to provide comprehensive dental treatment for all indigent children.

Dental defects in children is one of the most perplexing of all school health problems. A large portion of dental caries expected to occur in children can be prevented. Loss of teeth and impaired mouth function are largely the result of neglect. The solution to the problem of neglect is education of the parent and child in the use of preventive and control measures.

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### ANNUAL REPORT - 1958

### INSPECTIONS BRANCH

Dairy	Principal Ins	pector	R. Bentham Cert. R. San. 1
Food	tt	11	R. C. Morrow D.V.M., C.S.I. (C)
Housing	tt	tt	G. W. Kelly Cert. R. San. 1, C.S.I. (C)
Sanitation & Hygiene	tt	11	A. Cross Cert. R. San. 1. C.S.I. (C)
Laboratory	Senior Techni	cian	H. Robinson Cert. R. San. 1
Chief Health Inspecto	r		F. J. Rigby D.V.M., B.S.A. C.S.I. (C)

The shortage of inspectars mentioned in the 1957 report continued for most of the year. The shortage tended to curtail the activities of the Branch to some extent. Early in December four inspectors, who had successfully completed the course for sanitary inspectors were hired. This course conducted at the Manitoba Vocational Institute was a co-operative effort of this department, the Provincial Department of Health and the Department of Education and was financed under a National Health Grant. J. M. Sisler, B.S.A. M.Sc. of this department was appointed director of the course. On the completion of the course Mr. Sisler returned to this department for a short time, then resigned to accept a position with the Manitoba Department of Health and Public Welfare.

### HOUSING DIVISION:

During the year particular attention was given to the enforcement of regulations respecting "rooming houses". In order to facilitate the work and make for more uniform enforcement a proposal to license "rooming houses" was made. This proposal is being given serious consideration, but no decision on the proposal had been made at the close of the year.

Pursuant to a request received representatives of the department attended meetings of the Urban Renewal Board. The department co-operated with the Board in conducting surveys and making pertinent information concerning housing and factories available for the use of the Board. In December one experienced inspector was loaned to the Urban Renewal Board for an indefinite period.

Welfare Institutions, particularily nursing homes continued to effect improvements. Several such homes provided more suitable day room facilities, an increased supply of hot water and improved lighting for the patients.

## DIVISION OF SANITATION AND HYGIENE

One inspector, experienced in the use of firearms, was commissioned to shoot pigeons, before 7 a.m. wherever it was determined that the pigeons were creating a nuisance. Some 5,000 pigeons were destroyed and there has been an appreciably lessening in the number of complaints received respecting nuisances created by pigeons.

## INSPECTIONS BRANCH (CONT'D)

Routine inspection of workshops and factories continued.

Improvements were effected in lighting and ventilation in many premises.

Swimming pools were kept under constant supervision to ensure that satisfactory standards were maintained. Attendance at the pools indicates that there are not sufficient swimming pools in the area to accommodate all persons that desire to make use of such pools.

#### MILK INSPECTION

An adequate supply of fresh milk of good quality continued throughout the year. While there was a decrease in the number of milk producers there was an increase in the volume of milk shipped. The net result was that the average quantity of milk shipped by each producer was greater than in previous years.

The Federal Department of Agriculture continued the policy of eradicating tuberculosis from the cattle population and have now succeeded in reducing the incidence of that disease to a very low figure. A policy aimed at similarily eradicating Brucellosis from the cattle population was begun during the year. These efforts will reduce the chances of persons becoming afflicted with Undulant Fever as well as being of immeasurable value to the cattle owner.

### FOOD DIVISION

The introduction of new methods in the processing, packaging and distribution of food stuffs, together with the tendency of many people to use pre-cooked or ready-to-eat foods has altered the role of the food inspector to some extent. The past year has seen an increase in the number of super markets and the introduction of evening shopping. There has also been an increase in the number of liquor outlets and in the number of persons patronizing restaurants. The general "tone" of restaurants has shown improvement and generally restaurants are observing good food handling practices.

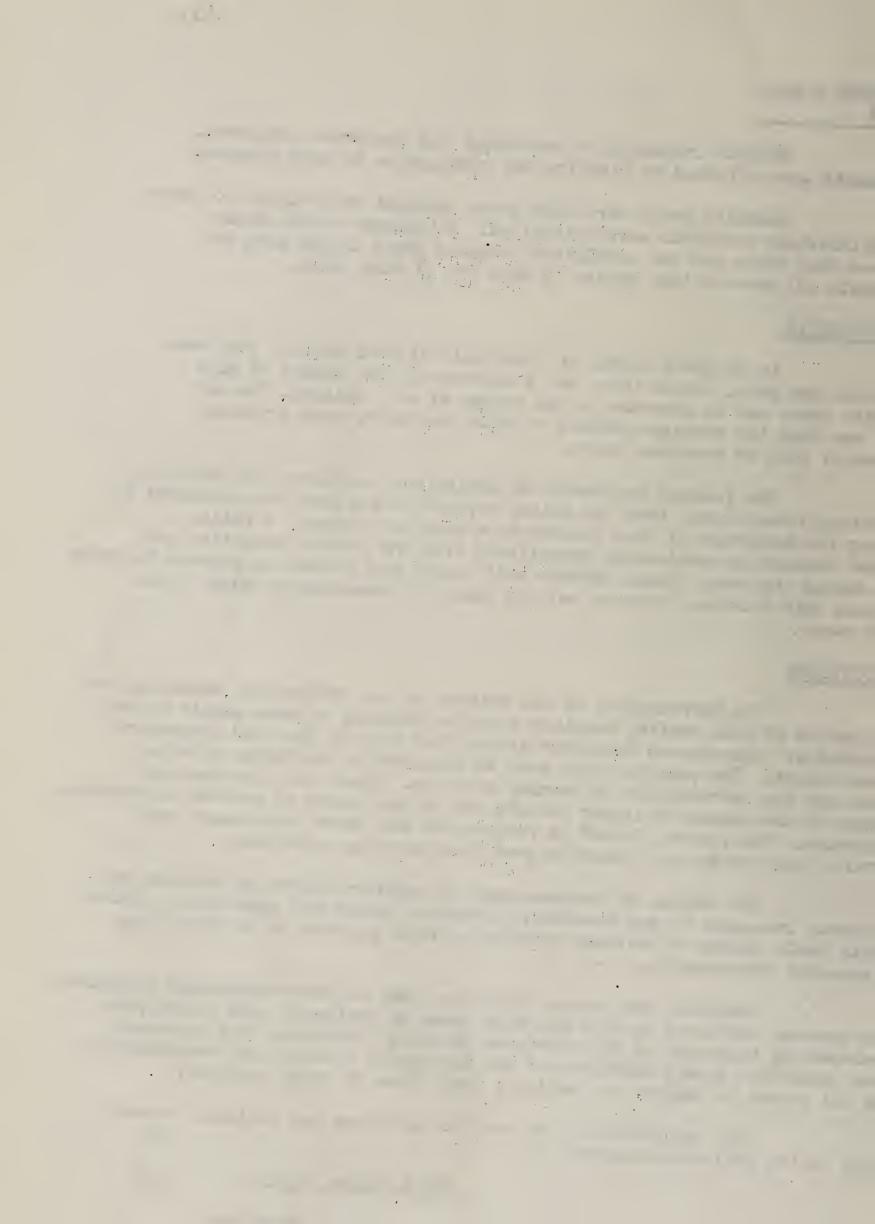
The volume of business done by caterers showed an increase and in several instances it was necessary to require individual caterers to either curtail their volume of business or enlarge their quarters so as to relieve the apparent overcrowding.

Bakeries and sausage factories came in for considerable attention, as in several instances changes had to be made in equipment, and in the plant to adequately take care of the increased volume of business. The increased use of stainless steel, plastics and new methods in cleaning and housekeeping have all tended to improve the sanitary conditions of these premises.

The activities of the various divisions are outlined in more detail in the following reports.

E. J. Rigby, D.V.M.

CHIEF HEALTH INSPECTOR.



# INSPECTIONS BRANCH FOOD DIVISION

## Annual Report (Jan. - Dec.) 1958

	Inspections	Contacts
Abattoirs	3	14
Bakeries	489	88
Beer Parlors		85
Bottling plants		10
Candy Manufacturers		7
Canteens and hotel kitchens		44 • ~2
Caterers		56 13
Dance Halls	144	20
Fish-filletting, Cold Storage etc	L;O	70
Frozen Food Locker Plants		10
Ice cream parlors		7
Ice Houses and Depots		6
Pickle and Vinegar Factories	14	19
Poultry slaughterhouses		87
Producer's Markets, Vegetable Stalls-	47	22
Restaurants	3,909	1,042
Retail Food Stores, Grocers, Butchers	131	504 68
Sausage Factories	139	22
Vehicles		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Fires in Food Establishments		107
Vending Machines	69	1
Glass Wash Service	3	1
Special Calls	31	
Processing plants	20	•
Miscellaneous	. 5	and the second second
TOTAL	9,391	2,320
Complaints	338	
Notices	1 047	• •
Verbal	• • • • • • • • • • • • • • • • • • •	
Written	241	
Infectious disease	e calls	- 148
Samples Examined	Food	1,125
Plans Examined 136	Plans	Approved 42
Condemnations		
	noduata LEO	LbsPoultry 533 lbs.
Baked goods 478 lbs. Dairy Prop. M.	edicine 210	" Fruit & Veg. 4,644 "
	1.485	"Sugar 58 "
	2.388	" Miscellaneous 40 "
	·	
Rejected Food Stuffs	Rice	36,552 lbs.

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## DAIRY DIVISION

## January to December - 1958

		Inspections	Contacts
COUNTRY:	Milk Producers  Prospective Producers  Milk Haulers	3,374 145 555	1,290 38 
CITY:	Pasteurization Plants (10 licensed). Ice cream Manufacturers Counter Freezers Butter Plants Cheese Plants Vehicles-Delivery Cans Inspected	81 249 563 55 99 86 1,607	2,726
SAMPLES TAKEN:	Water Milk Retail Milk Shippers Cream Ice cream Bottles for Sterility Special Samples	57 1,502 26,187 625 711 65 1,144	
GENERAL:	Special Calls  New Permits Issued  Cancellations  Complaints  Temperatures Taken  Samples Tested  Letters Sent Re: Premises  Notices Sent Re: Quality of Milk	1,218 39 113 7 6,214 1,625 1,077 7,625	

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## INSPECTIONS BRANCH

## BACTERIOLOGICAL LABORATORY

## January to December - 1958

WATER ANALYSIS Standard Plate Count Presumptive Test Confirmed Test Standard Plate Count Babcock Test	2,734 2,734 812 2,156 2,067
Coliform Test.  Phosphatase Test.  Resazurin Test.  Standard Plate Count.  Coliform Test.  Bacterial Test.	2,154 2,157 26,106 576 708 65
DIAGNOSTICDiphtheria Swabs	301 1 1 328
TOTAL TESTS	42,900

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6,826

1,394

## <u>Y E A R 1 9 5 8</u>

Inspections and reinspections:

Complaints attended to:

Notices Issued:

## HOUSING DIVISION - WINNIPEG HEALTH DEPARTMENT

Other forma	lose-up or renovate: 136 al notices: 1,379
Premises placarded "Unsanitary": Dwe	ellings, 57; attics only, 20; cellars only,
Violations or defects remedied during the year under orders from the Division	Police Court Summonses issued:
Overcrowding remedied: 52 families Damp or dark cellars vacated: 29 cell Unsatisfactory attics vacated: 29 al Dirty buildings cleansed throughout: 176 buildings Fly screens and/or storm sash provided 120 buildings Bed bugs exterminated: 72 buildings Cockroaches exterminated: 45 buildings Cockroaches exterminated: 57 residential properties Defective plumbing repaired: 211 buildings Additional plumbing installed to common with roominghouse regulations: 324 roominghouses Hot water provided: 111 buildings Walls, ceilings, floors repaired: 198 buildings Redecorated: 273 buildings	health inspector
Leaky roof repaired: 41 buildings Defective eavestroughing renewed: 57 buildings Sufficient heat provided: 298 build Defective cellars repaired: 73 cell Defective heating equipment renewed: 56 buildings	Lars
Gas stoves removed from bedrooms:  145 rooming houses  Floor covering renewed: 70 building Miscellaneous defects remedied:	Total fines, including costs of Court, \$209.60
335 buildings	George Kelly, Principal Inspector, Housing Division

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## <u>INSPECTIONS BRANCH</u>

## DIVISION OF SANITATION AND HYGIENE

## ANNUAL REPORT 1958

Licensed:	
	Inspections
Billiard parlors  Bowling Alleys  Dance Halls  Dog Kennels  Hatcheries, & Pet Shops  Junk yards  Laundries  Massage Premises  Poultry Keepers  Roller Skating Rinks  Second-hand Stores  Soap Manufacturing  Stables-board, feed and sale  Tanneries & Hide curing  Undertaking Parlors	32 1 13 47 109 108 76 20 5 289 10 12 14
TOTAL	. 876
Unlicensed:	an and decomposition in the latest the contract of the contrac
	/ mar
OFFICES, WORKSHOPS & FACTORIES	6,715
Comfort Stations Community Clubs Garbage & Refuse Lanes, streets, yards & vacant lots Schools Swimming Pools Wading Pools Workmen's Closets	15 3,479 1,716 9 439 18
Miscellaneous	887
TOTAL	6,599
Total Number of Inspections Interviews Estimated value of repairs Prosecutions 1 Complaints 1027	1,772
Notices: Verbal 3738	
Letter 125 Informal 232 Specification 44	
Mandatory 69 Water Samples	590

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INSPECTIONS BRANCH
DIVISION OF SANITATION AND HYGIENE
Annual report 1958
(Cont'd)

## Defects discovered and dealt with:

A. Cross, Principal Inspector Sanitation & Hygiene.

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## CITY HEALTH DEPARTMENT

## Summary of Expenditures, 1958 (to nearest dollar)

(a)	Personal Services	\$355,121
(b)	Outside Services	69,600
(c)	Materials, Supplies and Repairs	57,624
(d)	Equipment, additions & replace- ments	2,318
(e)	Fuel, water, light and power	273
(f)	Other expenses	1,504
(h)	Auto Expenses	16,259
		\$502,699

# Expenditures by Branches, 1958 (to nearest dollor)

Service	Total	Personal	Other
Inspection Services & Laboratory. • Child Medical Services • • • • •	110,964 37,599 43,324 188,116	• • • •	\$ 2,875 59,583 13,896 33,810 25,395 10,603 1,416
Totals	502,699	355,121	147,578

Gross Cost per Capita ..... \$1.97

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## CITY HEALTH DEPARTMENT

# Summary of Expenditures, 1958 (to nearest dollor)

(a)	Personal Services	\$67,955
(b)	Outside Services	5,556
(c)	Materials, Supplies and Repairs	1,060
(d)	Equipment, Additions & Replacements	6,392
(h)	Auto Expenses	3,139
·		\$84,102

# Expenditures by Projects, 1958 (to nearest dollor)

	<u>Service</u>	Total	Personal	<u>Other</u>
31-7(1)	Dontal Services	\$7,298	•••	<b>\$7,298</b>
01-7(2)	Registry for Handicapped children	6,129	\$ 1,554	4,575
Cl-7(3)	Assistance to Health Services Health Inspections	53,172	49,355	3,817
Cl-7(4)	Assistance to Health Services Public Health Nurses	17,503	17,045	458
	Totals	\$84,102	\$67,954	\$16,148

